## Diane Aupperle

**From:** Joyce Pinto
**Sent:** Friday, January 03, 2020 11:46 AM
**To:** Diane Aupperle
**Subject:** Fwd: OPRA request - 119 Schubert Ave, Block 147.09, Lot 9

Opra

Sent from my iPhone

Begin forwarded message:

> **From:** jessica martin <opra+request-8933-fdc65168@requests.opramachine.com>
> **Date:** January 3, 2020 at 11:13:07 AM EST
> **To:** Joyce Pinto <jpinto@runnemedenj.org>
> **Subject: OPRA request - 119 Schubert Ave, Block 147.09, Lot 9**
>
> Dear Runnemede Borough,
>
> This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.
> Records requested:
>
> Copies of construction permits pulled from 8/24/2016 to present
>
> Yours faithfully,
>
> jessica martin
>
> ---
>
> Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
> opra+request-8933-fdc65168@requests.opramachine.com
>
> Is jpinto@runnemedenj.org the wrong address for OPRA requests to Runnemede Borough? If so, please contact us using this form:
> https://opramachine.com/change_request/new?body=runnemede_borough
>
> Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
> https://opramachine.com/help/officers
>
> View this OPRA request & responses online:
> https://opramachine.com/request/119_schubert_ave_block_14709_lot
>
> Please note that in some cases publication of requests and responses will be delayed.
>
> If you find this service useful as an OPRA custodian, please ask your web manager to link to us

**Borough of Runnemede**
*24 N Black Horse Pike*
*Runnemede, NJ 08078*
*(856)939-2815* FAX *(856)939-2821*

Permit No. **20180031**
Control No. **93012859**
Block/Lot 147.09/9
Date 5/16/18

# Certificate of Approval

**IDENTIFICATION**

Block/Lot 147.09/9
Work Site Location 119 SCHUBERT AVE

Owner in Fee/Occupant US BANK TRUST NA
Address 3525 PIENDOMT BLG 7 STE 7
ATLANTA GA 30305
Telephone (404)492-8346
Contractor WIRE WIZ ELECTRIC SERVICES
Address 321 ISLAND LANE
EGG HARBOR TWP. NJ 08234
Telephone (609)962-9473 FAX
Lic. No. or Bldrs. Reg. No. None
Federal Emp. No.

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group R-5
Maximum Live Load
Construction Classification
Maximum Occupancy Load
Description of Work/Use:

RECONNECT SERVICE

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.

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 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

Construction Official

U.C.C. F260
(rev. 3/96)

Permit Fee $ 66
Paid [ ] Check No. 8621
Collected by: DA

**Borough of Runnemede**
*24 N Black Horse Pike*
*Runnemede, NJ 08078*
*(856)939-2815* FAX *(856)939-2821*

Permit No. **20180031 A**
Control No. **93012951**
Block/Lot 147.09/9
Date 5/16/18

# Certificate of Approval

**IDENTIFICATION**

Block/Lot 147.09/9
Work Site Location 119 SCHUBERT AVE

Owner in Fee/Occupant US BANK TRUST NA
Address 3525 PIENDOMT BLG 7 STE 7
ATLANTA GA 30305
Telephone (404)492-8346
Contractor WIRE WIZ ELECTRIC SERVICES
Address 321 ISLAND LANE
EGG HARBOR TWP. NJ 08234
Telephone (609)962-9473 FAX
Lic. No. or Bldrs. Reg. No. None
Federal Emp. No.

Home Warranty No.
Type of Warranty Plan: [ ] State [ ] Private
Use Group R-5
Maximum Live Load
Construction Classification
Maximum Occupancy Load
Description of Work/Use:

RECONNECT SERVICE***UPDATE**REPLACE 100A CIRCUIT BREAKER PANEL

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.

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
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[ ] 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

C, Construction Official

Permit Fee $ 66
Paid [ ] Check No. 8727
Collected by: DA

U.C.C. F260
(rev. 3/96)

3525

# ELECTRICAL SUBCODE
## TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 1-29-18
Control #
Date Issued
Permit # 18-031

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

Block 147.09 Lot 9 Qualification Code

Work Site Location 119 Schubert Ave. Runnemede, NJ 08078

Owner in Fee: US Bank Trust

Tel. (404) 492-8346 e-mail

Address 3525 Piedmont Blg 7 Ste 700 (street) Atlanta GA (municipality) 30305 (zip code)

Contractor: Wire Wiz Electrician Services Tel. (609) 926-9473

Address 321 Island Lane e-mail awirewiz@awirewiz.com

Egg Harbor Twp, NJ 08234

Contractor License No. 14668A Exp. Date 03/12/2018

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 223709777 FAX: (609) 926-7363

**B. ELECTRICAL CHARACTERISTICS**

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 245

**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 sign/Contractor sign and seal here:

Print name here: Michael J Darragh, President

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK: Reintroduction of 100A service

| QTY. | SIZE | ITEMS | FEE (Office Use Only) |
|---|---|---|---|
| | | Lighting Fixtures | |
| | | Receptacles | |
| | | Switches | |
| | | Detectors | |
| | | Light Poles | |
| | | Motors—Fract. HP | |
| | | Emergency & Exit Lights | |
| | | Communications Points | |
| | | Alarm Devices/F.A.C. Panel | |
| 0 | | TOTAL NUMBERS | $ |
| | | Pool Permit/with UW Lights | |
| | | Storable Pool/Spa/Hot Tub | |
| | | KW Elec. Range/Receptacle | |
| | | KW Oven/Surface Unit | |
| | | KW Elec. Water Heater | |
| | | KW Elec. Dryer/Receptacle | |
| | | KW Dishwasher | |
| | | HP Garbage Disposal | |
| | | KW Central A/C Unit | |
| | | HP/KW Space Heater/Air Handler | |
| | | KW Baseboard Heat | |
| | | HP Motors 1/+ HP | |
| | | KW Transformer/Generator | |
| 1 | 100 | AMP Service | |
| | | AMP Subpanels | |
| | | AMP Motor Control Center | |
| | | KW Elec. Sign/Outline Light | |
| 7 | CCO | AT RECONN | |

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW
[ ] No Plans Required 1-22-18 pc
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Electric Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date:
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 5/14/18
Approved by:

| INSPECTIONS Type: | Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| Rough | | | | |
| Barrier-Free | | | | |
| Trench | | | | |
| Temp. Serv. | | | | |
| Constr. Serv. | | | | |
| TCO | | | | |
| Other | | | | |
| Service | | | | |
| Final | 2/14/18 | | 5/14/18 | |
| Barrier-Free | | | | |
| Temp. Cut-in-Card Date Issued | Awaiting Utility | | | |
| Final Cut-in-Card Date Issued | CLOSE OUT UPDATE | | | |
| Annual Pool Inspection | | | | |
| Date of Grounding and Bonding Certification | | | | |

Administrative Surcharge $
Minimum Fee $ 65.00
State Permit Surcharge Fee $ 1.00
TOTAL FEE $

U.C.C. F120 (rev. 11/09)
Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

# ELECTRICAL SUBCODE
## TECHNICAL SECTION

*Update*

Date Received 4-9-18
Control #
Date Issued
Permit # 18-031 +A

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

Block 147.09 Lot 9 Qualification Code

Work Site Location 119 Sewell Ave
Runnemede NJ 08078

Owner in Fee: US Bank Trust

Tel. 404-492-8346 e-mail

Address 3525 Piedmont Dr. Bld 7 Ste 700
street municipality zip code

Contractor: Wire Wiz Electrician Services Tel. (609) 926-9473

Address 321 Island Lane e-mail awirewiz@awirewiz.com
Egg Harbor Township, NJ 08234

Contractor License No. 14668A Exp. Date 03/12/2018

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 223709777 FAX: (609) 926-7363

**B. ELECTRICAL CHARACTERISTICS**

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 295.00

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW
[–] No Plans Required 4/24/18 jpc
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Electric Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 5-14-18
Approved by:

| INSPECTIONS Type: | Dates (Month/Day) Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| Rough | | | | |
| Barrier-Free | | | | |
| Trench | | | | |
| Temp. Serv. | | | | |
| Constr. Serv. | | | | |
| TCO | | | | |
| Other | | | | |
| Service | | | | |
| Final | | | 5-14-18 | |
| Barrier-Free | | | | |

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

**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 sign/Contractor sign and seal here:

Print name here: Michael J Darragh, President

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK: Replace 100A circuit breaker panel.

| QTY. | SIZE | ITEMS | FEE (Office Use Only) |
|---|---|---|---|
| | | Lighting Fixtures | |
| | | Receptacles | |
| | | Switches | |
| | | Detectors | |
| | | Light Poles | |
| | | Motors—Fract. HP | |
| | | Emergency & Exit Lights | |
| | | Communications Points | |
| | | Alarm Devices/F.A.C. Panel | |
| | | | |
| 0 | | TOTAL NUMBERS | $ |
| | | Pool Permit/with UW Lights | |
| | | Storable Pool/Spa/Hot Tub | |
| | | KW Elec. Range/Receptacle | |
| | | KW Oven/Surface Unit | |
| | | KW Elec. Water Heater | |
| | | KW Elec. Dryer/Receptacle | |
| | | KW Dishwasher | |
| | | HP Garbage Disposal | |
| | | KW Central A/C Unit | |
| | | HP/KW Space Heater/Air Handler | |
| | | KW Baseboard Heat | |
| | | HP Motors 1/+ HP | |
| | | KW Transformer/Generator | |
| | | AMP Service | |
| | | AMP Subpanels | |
| | | AMP Motor Control Center | |
| | | KW Elec. Sign/Outline Light | |
| 1 | 100A | CIB panel | |

Administrative Surcharge $
Minimum Fee $ 60.00
State Permit Surcharge Fee $
TOTAL FEE $

U.C.C. F120 (rev. 11/09)
Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

# PLUMBING SUBCODE
## TECHNICAL SECTION

Date Received / Control # 2-27-19

Date Issued / Permit # 19-056

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

Block 147.09 Lot 9 Qualification Code

Work Site Location 119 Schubert Ave

Owner in Fee: America Trust Residential

Tel. 609 271-1440 Home e-mail

Address 3630 Peach Tree RD Atlanta GA 30326
street municipality zip code

Contractor: BMP Mechanical LLC Tel. (856) 534-3551

Address 134 Glenn Ave e-mail bmpmechanical@yahoo.com
Blackwood NJ 08012

Contractor License No. 19HC00079600 Exp. Date 06/30/2020

Home Improvement Contractor Registration No. or Exemption Reason 13VH06204100

Federal Emp. ID No. 273709567 FAX: (856) 352-2933

**B. PLUMBING CHARACTERISTICS**

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 1400 est

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date:
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

| INSPECTIONS Type: | Dates (Month/Day) Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| Slab | | | | |
| Rough | | | | |
| Water | | | | |
| Sewer | | | | |
| Fixtures | | | | |
| Gas Equipment | | | | |
| Gas Piping | | | | |
| LPGas Tank | | | | |
| Fuel Oil Piping | | | | |
| Solar | | | | |
| TCO | | | | |
| Final | | | | |
| | | | | |

**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 sign/Contractor sign and seal here:

Print name here: Zoran Panic

[ ] Licensed Plumbing Contractor [X] Exempt Applicant

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK
Connect hvac drain

| QTY. | FIXTURE/EQUIPMENT | FEE (Office Use Only) $ |
|---|---|---|
| 1 | Water Closet | 13.00 |
| | Urinal/Bidet | |
| 1 | Bath Tub | 13.00 |
| | Lavatory | |
| | Shower | |
| | Floor Drain | |
| 2 | Sink | 26.00 |
| | Dishwasher | |
| | Drinking Fountain | |
| 1 | Washing Machine | 13.00 |
| | Hose Bibb | |
| 1 40 Gal | Water Heater GAS | 26.00 |
| | Fuel Oil Piping | |
| | Gas Piping | |
| | LPGas Tank | |
| | Steam Boiler | |
| | Hot Water Boiler | |
| | Sewer Pump | |
| | Interceptor/Separator | |
| | Backflow Preventer | |
| | Greasetrap | |
| | Sewer Connection | |
| | Water Service Connection | |
| | Stacks | |
| | Other | |

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

U.C.C. F130 (rev. 11/09)
Internet version

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

RECEIVED
FEB 13 2019
BY:

RECEIVED
FEB 28 2019
BY:

Attention: Howard
609-271-1948
Please call owner for permit fees

Date Received 2-27-19
Control #
Date Issued
Permit # 19-056

# ELECTRICAL SUBCODE
## TECHNICAL SECTION

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

Block 147.09 Lot 9 Qualification Code

Work Site Location 119 SCHUBERT AVE. RUNNEMEDE

Owner In Fee: AMORE TRUST

Tel. 609 271-1448 Howard e-mail Peach Tree 24hour GA

Address

Contractor: George Cassidy Electric

Address 2963 Mt. Ephraim Avenue Camden N.J. 08104

Contractor License No. N.J. LIC 11322 Exp. Date 4/2021

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. (609) 352-6971 FAX:

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 3000.00

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 sign/Contractor sign and seal here:

Print name here: George Cassidy

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Contr [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Rough Wire Home

| QTY. | SIZE | ITEMS |
|---|---|---|
| 19 | | Lighting Fixtures |
| 35 | | Receptacles |
| 16 | | Switches |
| 5 | | Detectors |
| | | Light Poles |
| | | Motors—Fract. HP |
| | | Emergency & Exit Lights |
| | | Communications Points |
| | | Alarm Devices/F.A.C. Panel |
| 72 | | TOTAL NUMBERS |
| | | Pool Permit/with UW Lights |
| | | Storable Pool/Spa/Hot Tub |
| | | KW Elec. Range/Receptacle |
| | | KW Oven/Surface Unit |
| | | KW Elec. Water Heater |
| | | KW Elec. Dryer/Receptacle |
| | | KW Dishwasher |
| | | HP Garbage Disposal |
| 1 | 30A | KW Central A/C Unit |
| | | HP/KW Space Heater/Air Handler |
| | | KW Baseboard Heat |
| | | HP Motors 1/+ HP |
| | | KW Transformer/Generator |
| | | AMP Service |
| | | AMP Subpanels |
| | | AMP Motor Control Center |
| | | KW Elec. Sign/Outline Light |

FEE (Office Use Only)

| | |
|---|---|
| Administrative Surcharge | $ |
| Minimum Fee | $ |
| State Permit Surcharge Fee | $ |
| TOTAL FEE | $ |

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial-Underslab Utilities Approved
Date: Approved by:
[ ] Electric Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

| INSPECTIONS | Dates (Month/Day) Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| Type: | | | | |
| Rough | | | | |
| Barrier-Free | | | | |
| Trench | | | | |
| Temp. Serv. | | | | |
| Constr. Serv. | | | | |
| TCO | | | | |
| Other | | | | |
| Service | | | | |
| Final | | | | |
| Barrier-Free | | | | |
| Temp. Cut-In-Card Date Issued | | | | |
| Final Cut-In-Card Date Issued | | | | |
| Annual Pool Inspection | | | | |
| Date of Grounding and Bonding Certification | | | | |

U.C.C. F120 (rev. 11/09) Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies

# MECHANICAL INSPECTOR
## TECHNICAL SECTION

RECEIVED
FEB 05 2019
BY:

Date Received Control # 2-27-19

Date Issued Permit # 19-056

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

Block 147.09 Lot 4 Qualification Code

Work Site Location 119 Seaboard Ave

R. C. 2/22/19

Owner in Fee: Amerifirst Residential 3630 Peach Tree Rd

Tel. 609 877-1440 e-mail Atlanta GA 30326

Address 3630 Peach Tree Rd (street) (municipality) 30326 (zip code)

Contractor: BMP Mechanical LLC Tel. (856) 534-3551

Address 134 Glenn Ave e-mail bmpmechanical@yahoo.com

Blackwood NJ 08012

Contractor License No. or Builder Registration No. 19HC00079600 Exp. Date 06/30/2020

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH06204100

Federal Emp. ID No. 273709567 FAX: (856) 352-2933

**B. MECHANICAL CHARACTERISTICS**

**Use Group** Present: Proposed:

**Heating System work:** [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [X] Replacement

Type: [ ] Hydronic [X] Hot Air

Fuel Type: [X] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Estimated Cost of Mechanical Work $ 1,800

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW
[ ] No Plans Required
[ ] Mechanical Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 2/27/19
Approved by:
SUBCODE APPPROVAL for CERTIFICATE
[ ] CA [ ] CCO
Date:
Approved by:

| INSPECTIONS Type: | Failure | Failure | DATES Approval | Initial |
|---|---|---|---|---|
| Gas Piping | | | | |
| Appliance | | | | |
| Chimney/Vent | | | | |
| Oil Piping | | | | |
| Oil Tank | | | | |
| LPG Tank | | | | |
| Hydronic Piping | | | | |
| Fireplace | | | | |
| Chimney Cert. | | | 2/27/19 | |
| Other | | | | |

**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.

Sign here:

Print name here: Zoran Panic

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK

Install Complete HVAC equipment heater coil a/c
Remove existing hvac system.

| NO. | FIXTURE/EQUIPMENT | FEE (Office Use Only) |
|---|---|---|
| | Water Heater | $ |
| | Fuel Oil Piping Connections | |
| | Gas Piping Connections | |
| | Steam Boiler | |
| | Hot Water Boiler | |
| 1 | Hot Air Furnace | 65 |
| | Oil Tank | |
| | LPG Tank | |
| | Fireplace | |
| 1 | Other | |

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
**TOTAL FEE** $



Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.