

BLOCK 323.23 LOT 7

QUALIFICATION CODE

ADDRESS (SITE)

224 Katie Lynn Court

PERMIT NO.

03-4887

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 224 Katie Lynn Court
2. Name of Owner in Fee: Stephen J. Cannella To [REDACTED]
Address 224 Katie Lynn Court Brick, NJ 08723
street municipality zip code
3. Ownership in Fee: Public Private ☒
4. Principal Contractor: Self - Stephen J. Cannella Tel. [REDACTED]
Address 224 Katie Lynn Court Brick, NJ 08723
License No. OR, if new home, Builder Reg. No. N/A Exp. Date N/A
Federal Employee No. N/A FAX [REDACTED]
5. Architect or Engineer _____ Tel. (____) _____
Address _____
6. Responsible Person in Charge of Work Self - Stephen J. Cannella
Tel. [REDACTED]

V. FEE SUMMARY (for office use only)

		Update ^{1B}	Update
1. Building	\$ <u>293</u>		
2. Electrical	<u>40</u>		
3. Plumbing	<u>35</u>	<u>130</u>	
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee	<u>30</u>	<u>1</u>	
10. Subtotal	<u>35</u>		
11. Cert. of Occupancy	<u>30</u>		
12. Other	<u>30</u>		
13. TOTAL	\$ <u>463</u>	<u>131</u>	

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories 2
2. Height of Structure 25 (match existing) ft.
3. Area — Largest Floor 1860 sq. ft.
4. New Building Area 990 sq. ft.
5. Volume of New Structure 10,890 cu. ft.
6. Construction Classification addition
7. Total Land Area Disturbed 0 sq. ft.
8. Flood Hazard Zone NO
9. Base Flood Elevation _____ ft.
10. Wetlands yes no
11. Max. Live Load _____
12. Max. Occupancy Load _____

(office use only)

2nd story over garage

II. PROPOSED WORK	Est. Cost	OPTIONAL (for office use only)							
		Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Re-jection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☒ Addition	<u>39,600</u>	<u>[Signature]</u>	<u>9/1</u>		<u>10-27-03</u>	<u>[Signature]</u>			
4. ☐ Alteration									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☒ Electrical	<u>3700</u>				<u>10-8-03</u>	<u>[Signature]</u>			
8. ☐ Elevator Devices					<u>11-19-03</u>	<u>[Signature]</u>			
9. ☐ Asbestos Abat. Subch. B					<u>10-8-03</u>	<u>[Signature]</u>			
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	<u>43,300</u>	<u>ENG</u>	<u>9/25/03</u>		<u>9/25/03</u>	<u>[Signature]</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 1After Construction 1Net Gain or Loss 0

B. NON-RESIDENTIAL

1. State Specific Use:

2. Use Group:

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 Steph J. C. C.

Date 9/15/03

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 _____

Address _____

Telephone (_____) _____

Signature _____

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

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									IMPORTANT A.H.B.T. - EXEMPT
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition	Name of Code & Edition
Building _____	Energy _____
Electrical _____	Barrier Free _____
Plumbing _____	Flood Hazard _____
Fire Protection _____	As Built Elevation Cert. _____
Mechanical _____	Other _____

X. CERTIFICATES ISSUED (office use only)

	DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____	_____
☐ Certificate of Approval	No. _____	_____	_____	_____
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____

will bring
in engineer
certification
MT



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 04/09/2010
Control Number _____
Permit Number 03-4857
Permit Issue Date 10/29/2003
Certificate Number 03-4857

Certificate

Construction Code Division
(Certificate of Occupancy)

Identification

Work Site Location: 224 KATIE LYNN CT 2ND STORY OVER Block: 323.23 Lot: 7 Qual: _____
GARAGE, NJ
Owner in Fee: CANNELLA, STEPHEN J
Owner Address: SAME BRICK NJ 08723-
Telephone: [REDACTED]
Contractor CANNELLA, STEPHEN J
Address SAME BRICK NJ 08723-
Telephone: [REDACTED] Fax: _____
License Number or builders registration Number: _____ Federal Emp. Number: _____

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification: _____

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: ADDITION

Certificate Comments:

☒ **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.

☐ **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.

☐ **Temporary Certificate of Compliance**

The following conditions must be met no later than or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:

Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 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 Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **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

☐ **Temporary Certificate of Occupancy**

The following conditions must be met no later than: or the owner will be subject to fine or order to vacate:

This certificate has an expiration date of:

Conditions to be met:

Construction Official

Fee: \$35.00

Check Number: 6690

Collected By: _____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUB CODE
TECHNICAL SECTION

Date Received 11/18/2003
Date Issued 04/07/0134
Control #
Permit # 03-4857+A

11-19-03

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

Block 323.23 Lot 7 Qual
Work Site Location 224 KATIE LYNN CT

2ND STORY OVER GARAGE

Owner in Fee CANNELLA, STEPHEN J

Address SAME

BRICK, NJ 08723-

Contractor

Address

Tele. ()

Lic. No. or Bldgs. Reg. No.

Federal Emp. No. HO-

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5

Building Sewer Size

Water Sewer Size

Estimated Cost of Plumbing Work \$ 500

Public Sewer

Private Septic

Public Water

Private Well

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.

Signature/Contractor Seal

[] Licensed Plumbing Contractor [] Exempt Applicant

Signature/Contractor Seal

[] Licensed Plumbing Contractor [] Exempt Applicant

Signature/Contractor Seal

[] Licensed Plumbing Contractor [] Exempt Applicant

Signature/Contractor Seal

[] Licensed Plumbing Contractor [] Exempt Applicant

Signature/Contractor Seal

[] Licensed Plumbing Contractor [] Exempt Applicant

Signature/Contractor Seal

[] Licensed Plumbing Contractor [] Exempt Applicant

Signature/Contractor Seal

[] Licensed Plumbing Contractor [] Exempt Applicant

Signature/Contractor Seal

[] Licensed Plumbing Contractor [] Exempt Applicant

Signature/Contractor Seal

[] Licensed Plumbing Contractor [] Exempt Applicant

Signature/Contractor Seal

[] Licensed Plumbing Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.

FIGURE/EQUIPMENT

FEE (Office Use Only)

Water Closet

0

Urinal / Bidet

0

Bath Tub

0

Lavatory

0

Shower

0

Floor Drain

0

Sink

0

Dishwasher

0

Drinking Fountain

0

Washing Machine

0

Hose Bib

0

Water Heater

35

Fuel Oil Piping

0

Gas Piping

25

Steam Boiler

0

Hot Water Boiler

0

Sewer Pump

0

Interceptor / Separator

0

Backflow Preventer

0

Greasetrap

0

Sewer Connection

0

Water Service Connection

0

Stacks

0

Other 2 AC

70

Other

0

Administrative Surcharge

0

Minimum Fee

0

TOTAL FEE

130

DCA State Permit Fee

1

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SECTION
TECHNICAL SECTION

Date Received 09/16/2003
Date Issued 10/29/03
Control # C19-88
Permit # 03-4857

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

Block 323.23 Lot 7 Qual
Work Site Location 224 KATIE LYNN CT
2ND STORY OVER GARAGE

Owner in Fee CANNELLA, STEPHEN J
Address SAME
BRICK, NJ 08723-

Tele. ()
Contractor

Tele. ()
Lic. No. or Bldgs. Reg. No.
Federal Emp. No. HO-

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R-5 Proposed R-5
Constr Class Present Proposed
Heating Systems [] New [] Existing [] HVAC
Type: [] Gas [] Oil [] Elect [] Solar
[] Other
Location:
Total Est Cost of Fire Prot Work \$ 50



JOB SUMMARY (Office Use Only)

PLAN REVIEW
[] No Plans Required
Joint Plan Review Required:
Type Alarm Sys
Suppr Test
Standpipe
Fire Pump
Preeng Sys
Mechanical
Smoke Ctl
TCO
Final
Other

Dates (Month/Day)
Failure Failure Approval Initial
4/7/00

Approved By: [Signature]
Date: 10-5-03
SUBCODE APPROVAL
[] CO [] CCO
Approved By: [Signature]
Date: 4/7/00

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) 4
Supervisory Devices (tamper, low/high air) 0
Signalling Devices (horn/strobes, bells) 0
Other Devices CO DET 1
TOTAL 5
FEE (Office Use Only)

in accordance
to existing.

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 0
Smoke Control System 0
Gas [] or Oil [] Fired Appliances 10
Other Furnace 460
Other 0

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

Signature

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCCARRS.24E
FELT
SUBCODE
TECHNICAL SECTION

Date Received 09/16/2003
Date Issued 10/29/03
Control # C19-88
Permit # 03-4857

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

D. TECHNICAL SITE DATA

FEE (Office Use Only)

Block 223.23 Lot 7 Qual
Work Site Location 224 KATIE LYNN CT
2ND STORY OVER GARAGE

NO. 8
ITEM Lighting Fixtures

Receptacles 20
Switches 14
Detectors 4
Light Poles 0
Motors-Fract HP 0
Emergency & Exit Lights 0
Communications Points 0
Alarm Devices/F.A.C. Panel 0
TOTAL NUMBERS 46

Owner in Fee CANNELLA, STEPHEN J
Address SAME
BRICK, NJ 08723-

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

Contractor STRICTLY ELECTRIC
Address 514 DOROTHY PLACE
BRICK, NJ 08723-

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

Tele. (732)477-9260
Lic. No. or Bldrs. Reg. No. 13903A
Federal Emp. No. 22-3709311

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

B. ELECTRICAL CHARACTERISTICS
Use Group - Present R-5 Proposed R-5
Building Occupied as Utility Co.
Estimated Cost of Electrical Work \$ 3,700

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
☐ No Plans Required
Joint Plan Review Required:
☐ Bldg ☐ Plumb
☐ Fire ☐ Elevator
☒ Elect Plans Approved
Date: 10/20/03

INSPECTIONS
Type Failure Failure Approval Initial
Rough
Temp Serv
Const Serv
TCO
Other
Service
Final
Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

Administrative Surcharge \$ 0
Minimum Fee \$ 0
TOTAL FEE \$ 40
DCA State Permit Fee \$ 0

Approved By: JVK
SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA
Date: 4-8-10
Approved By: JVK

Administrative Surcharge \$ 0
Minimum Fee \$ 0
TOTAL FEE \$ 40
DCA State Permit Fee \$ 0

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.

Paid ☐ Check #
Collected by:

Administrative Surcharge \$ 0
Minimum Fee \$ 0
TOTAL FEE \$ 40
DCA State Permit Fee \$ 0

Applicant's Signature/Contractor's Seal and Signature
☐ Licensed Electrical Contractor ☐ Exempt Applicant

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 09/16/2003
Date Issued 10/29/03
Control # C19-88
Permit # 03-4857

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

Block 323.23 Lot 7 Qual
Work Site Location 224 KATIE LYNN CT

2ND STORY OVER GARAGE

Owner in Fee CANNELLA, STEPHEN J

Address SAME

BRICK, NJ 08723-

Tele [REDACTED]

Contractor

Address

Tele () Fax ()

Lic. No. of Bldrs. Reg. No.

Federal Emp. No. HO-

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☒ No Plans Req.	10/21/03	TH	Type	Failure
☒ All			Footings	Initial
☐ Foundation			Foundation	
☐ Frame			Slab	
☐ Other			BarrierFree	
Joint Plan Review Required:			Insulation	12/5/03
☐ Elect			Finishes	
☐ Fire			Energy	
SUBCODE APPROVAL			Mechanical	
☐ CO			TCO	
☐ CA			Other	
Date: 11/21/03			Final	11/21/03
Approved By: [Signature]			BarrierFree	

B. BUILDING CHARACTERISTICS

Use Group	Present R-5	Proposed R-5	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed	1. New Bldg. \$ 39,000
No. of Stories	2		2. Alteration \$ 600
Height of Structure	25 Ft.		3. Total (1+2) \$ 39,600
Area Largest Floor	1,860 Sq. Ft.		
New Bldg. Area/All Floors	990 Sq. Ft.		Industrialized Building:
Volume of New Structure	10,890 Cu. Ft.		☐ State Approved
Total Land Area Disturbed	0 Sq. Ft.		☐ HUD

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

2ND STORY ADDITION ABOVE GARAGE & FAMILY ROOM/PROPOSED 2 NEW BEDROOMS/
RE-LOCATION OF 1ST FLOOR FURNACE & HWY TO GARAGE/VINYL SIDING FOR WHOLE
HOUSE/NEW ROOF SHINGLES FOR ENTIRE HOUSE

TYPE OF WORK	FEE (Office Use Only)
☐ New Building	\$ 0
☒ Addition	272
☒ Alteration	21
☐ Roofing	0
☐ Siding	0
☐ Fence	0
☐ Sign	0
☐ Pool	0
☐ Asbestos Abatement Subchapter 8	0
☐ Lead Haz. Abatement M40-5.17	0
☐ Other	0
☐ Demolition	0

Paid ☐ Check #	Administrative Surcharge	\$ 0
Collected by:	Minimum Fee	\$ 0
	TOTAL FEE	\$ 293
	DCA State Permit Fee	\$ 30

TOWNSHIP OF TOMS RIVER

OFFICE OF PERMITS AND INSPECTIONS

Telephone 732-341-1000
Facsimile 732-473-9535

33 WASHINGTON STREET
P.O. BOX 728
TOMS RIVER, NJ 08754-0728

OPEN DECK
SHEATHING

Block: 323.23

Address: 224 Marie Lynn Ct.

Lot: 7

Back, N.J.

I, Carol Smith, would like to request an inspection for the work listed above. I accept responsibility and do not hold the Township of Toms River responsible for inspecting any of the work that is within in the walls or other locations that cannot be inspected.

Signature Carol Smith
(Print)

Signature Carol Smith
(Sign)

Date April 7, 2010

TOWNSHIP OF BRICK

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

Stephen C. Acropolis, Mayor

Township Council:

Anthony Matthews – President
Dan Toth – Vice President
Domenick Brando
Brian DeLuca
Joseph Sangiovanni
Ruthanne Scaturro
Michael A. Thulen, Sr.



Department of Community Development & Land Use

James A. Priolo, Director
Michael P. Fowler, Deputy Director

732-262-1027

Fax: 732-262-2941
www.twp.brick.nj.us

March 11, 2010

Mr. & Mrs. James Smith
224 Katie Lynn Court
Brick, NJ 08723

Re: Permit # 03-4857 – 2nd Story Addition over garage

Dear Mr. & Mrs. Smith:

It has come to the attention of the Division of Inspections that the above permit has not yet received final inspections or a Certificate of Occupancy.

Please contact this office by calling (732) 262-4627 to schedule your final inspections. Failure to do so may result in a violation and/or fine of up to \$2,000 for occupying without a Certificate of Occupancy and failure to obtain final inspections.

Sincerely,

Mary Jane Rinaldi
Sr. Permit Clerk

Cc: Daniel F. Newman, Jr., Construction Official
File



TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Update Issued 11/19/2003
Control #
Permit # 03-4857+A
Permit Issued 10/29/2003

UCC NEW JERSEY
PERMIT UPDATES

IDENTIFICATION Block 323.23 Lot 7
Mort Site Location 323 KATIE LYNN CT
2ND STORY OVER GARAGE
Owner in Fee CANNELLA, STEPHEN J
Address SAME
BRICK, NJ 08723
Telephone

Contractor HOME OWNERS
Address
Telephone ()
Lic. No. of Bldgs. Reg. No.
Federal Emp. No. NO-

Is hereby granted permission to perform the following work:
☐ BUILDING ☒ PLUMBING ☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATION DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter 8 only)
DESCRIPTION OF WORK:
ADD PLUMBING

Estimated Cost of Work \$ 500

[Signature]
Construction Official

11/19/2003

Date

U.C.C. F190 (rev. 3/96) NJ UCCARS 5.24E

PAYMENTS (Office Use Only)
Building 0
Electrical 0
Plumbing 130
Fire Protection 0
Elevator Devices 0
Other
DCA State Permit Fee 1
Cert. of Occupancy 0
Other
Total 131
Check No. 6835
Cash
Collected By M/R

11/19/03 9:13AM 00000045351
**02 SERV.002
#4857
PLUMBING
DCA
CHECK \$131.00
\$130.00
\$1.00

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 11/18/2003
 Date Issued 01/01/0794
 Control #
 Permit # 03-4857+A 11-99-03

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

D. TECHNICAL SITE DATA (List all fixtures.)

Block 323.23 Lot 7 Qual
 Work Site Location 224 KATIE LYNN CT
 2ND STORY OVER GARAGE

NO.

FEE (Office Use Only)

Owner in Fee CANNELLA, STEPHEN J
 Address SAME
 BRICK, NJ 08723-

Telephone

Contractor
 Address

Lic. No. of Bldgs. Reg. No.
 Federal Emp. No. HO-

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5
 Building Sewer Size
 Water Sewer Size
 Estimated Cost of Plumbing Work \$ 500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
☐ No Plans Required
 Joint Plan Review Required:

☐ Bldg ☐ Elect
☐ Fire ☐ Elevator
☐ Plumb. Plans Approved

Date: 11/18/03
 Approved By: [Signature]
 SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA

Approved By:
 Date:

INSPECTIONS	Dates (Month/Day)	Initial
Type	Failure	Failure Approval
Slab		
Rough		
Water		
Sewer		
Fixtures		
Gas Equip.		
Gas Piping		
Solar		
TCO		

FIXTURE/EQUIPMENT	FEE (Office Use Only)
Water Closet	0
Urinal / Bidet	0
Bath Tub	0
Lavatory	0
Shower	0
Floor Drain	0
Sink	0
Dishwasher	0
Drinking Fountain	0
Washing Machine	0
Hose Bib	0
Water Heater	35
Fuel Oil Piping	90
Gas Piping	25
Steam Boiler	0
Hot Water Boiler	0
Sewer Pump	0
Interceptor / Separator	0
Backflow Preventer	0
Greasetrapp	0
Sewer Connection	0
Water Service Connection	0
Stacks	0
Other 2 AC	70
Other	0

Paid ☐ Check \$
 Collected by:
 Administrative Surcharge \$
 Minimum Fee \$
 TOTAL FEE \$ 130
 DCA State Permit Fee \$ 1

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.

Signature/Contractor Seal
☐ Licensed Plumbing Contractor ☐ Exempt Applicant

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 11/18/2003
 Date Issued 01/01/0194
 Control #
 Permit # 03-4857+A 11-19-03

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

D. TECHNICAL SITE DATA (List all fixtures.)

Block 323.23 Lot 7 Qual
 Work Site Location 224 KATE LYNN CT
 2ND STORY OVER GARAGE

Owner in Fee CANNELLA, STEPHEN J

Address SAME

BRICK NJ 08123-

Tele

Contractor

Address

Tele. ()

Lic. No. of Bldrs. Reg. No.

Federal Emp. No. HO-

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed R-5
 Building Sewer Size [] Public Sewer [] Private Septic
 Water Sewer Size [] Public Water [] Private Well
 Estimated Cost of Plumbing Work \$ 500

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required
 Joint Plan Review Required:

[] Bldg [] Elect

[] Fire [] Elevator

[] Plumb. Plans Approved

Date: 11/18/03

Approved By: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [] CA

Approved By:

Date:

INSPECTIONS
 Type Failure Failure Approval Initial

Slab

Rough

Water

Sewer

Fixtures

Gas Equip.

Gas Piping

Solar

TCO

NO.

FIXTURE/EQUIPMENT

FEE (Office Use Only)

Water Closet

0

Urinal / Bidet

0

Bath Tub

0

Lavatory

0

Shower

0

Floor Drain

0

Sink

0

Dishwasher

0

Drinking Fountain

0

Washing Machine

0

Hose Bib

0

Water Heater

35

Fuel Oil Piping

0

Gas Piping

25

Steam Boiler

0

Hot Water Boiler

0

Sewer Pump

0

Interceptor / Separator

0

Backflow Preventer

0

Greasetrap

0

Sewer Connection

0

Water Service Connection

0

Stacks

0

Other 2 AC

70

Other

0

Paid [] Check #
 Collected by:

Administrative Surcharge \$

Minimum Fee \$

TOTAL FEE \$ 130

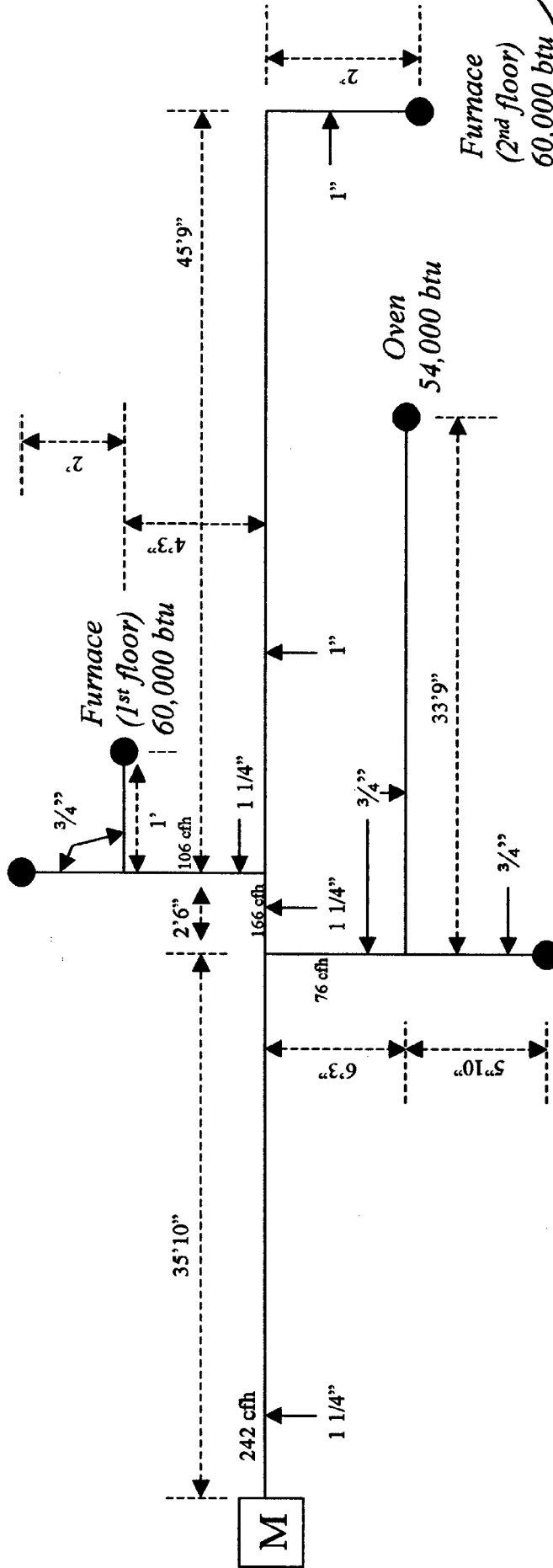
DCA State Permit Fee \$ 1

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.

Signature/Contractor Seal

[] Licensed Plumbing Contractor [] Exempt Applicant

Hot Water Heater
46,000 btu



Clothes Dryer
22,000 btu

Oven
54,000 btu

Furnace
(2nd floor)
60,000 btu

Furnace
(1st floor)
60,000 btu

1000btu=1cfh

Proposed 2nd Floor Addition
Block 323.23, Lot 7
Brick, New Jersey

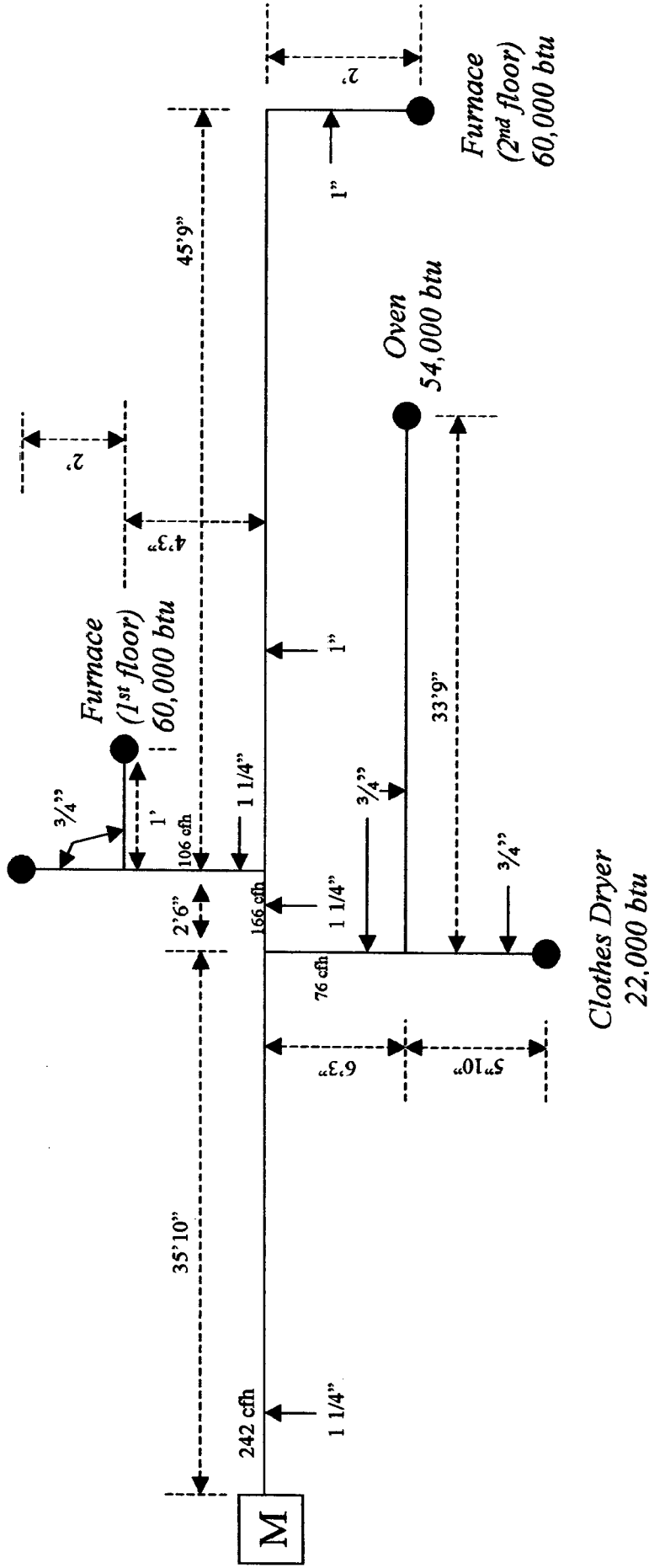
GAS PIPE DIAGRAM

DATE: November 19, 2003
DRAWN BY: SJC

Stephen J. Cannella
224 Katie Lynn Court
Brick, New Jersey 08723

11/19/03

Hot Water Heater
46,000 btu



1000btu=1cfh

Proposed 2nd Floor Addition
Block 323.23, Lot 7
Brick, New Jersey

GAS PIPE DIAGRAM

DATE: November 19, 2003
DRAWN BY: SJC

Stephen J. Cannella
224 Katie Lynn Court
Brick, New Jersey 08723
11/19/03

134

Figure 1



11/18/03

Correction list

Code section

11/18/03



TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 10/29/2003
Control #
Permit # 03-4857

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 323.23 Lot 7

Work Site Location 224 KATIE LYNN CT
2ND STORY OVER GARAGE

Owner in Fee CANNELIA, STEPHEN J
Address SAME

Telephone BRICK, NJ 08723-
[REDACTED]

Contractor H O M E K O W N E R
Address

Telephone ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. HO-

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

2ND STORY ADDITION ABOVE GARAGE & FAMILY ROOM/PROPOSED 2 NEW BEDROOMS/
RE-LOCATION OF 1ST FLOOR FURNACE & HHV TO GARAGE/VINYL SIDING FOR WHOLE
HOUSE/NEW ROOF SHINGLES FOR ENTIRE HOUSE

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 \$ 43,200

Construction Official
[Signature]

Date 10/29/2003

U.C.C. P170 (rev. 3/96) NJ UCCMS 5.24E

PAYMENTS (Office Use Only)
Building 293
Electrical 40
Plumbing 0
Fire Protection 35
Elevator Devices 0
Other
DCA State Permit Fee 30
Cert. of Occupancy 35
Other 32222
Total 433
Check No. 6690
Cash
Collected By TL

463-

10/29/2003 2:06 PM 000000#4873
4857
BUILDING \$293.00
ELECTRIC \$40.00
FIRE \$35.00
DCA \$30.00
PA \$35.00
PA \$15.00
PA \$15.00
TOTAL \$463.00
CHECK \$463.00
HAND \$0.00

000000#4873
XX04 SERV.004

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 09/16/2003
 Date Issued 10/29/03
 Control # C19-88
 Permit # 02-4857

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

Block 323.23 Lot 7 Qual _____
 Work Site Location 224 KATIE LYNN CT
 Owner in Fee CANNELLA, STEPHEN J
 Address SAME
 BRICK, NJ 08723-
 Contractor STRICTLY ELECTRIC
 Address 514 DOROTHY PLACE
 BRICK, NJ 08723-
 Tele. (732) 477-9260
 Lic. No. or Bldrs. Reg. No. 13905A
 Federal Emp. No. 22-3709311

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-5 Proposed R-5
☐ Pole/Pad # ☐ Temporary ☐ Other
 Building Occupied as Utility Co.
 Estimated Cost of Electrical Work \$ 3,700

JOB SUMMARY (Office Use Only)

PLAN REVIEW
☐ No Plans Required
 Joint Plan Review Required:
☐ Bldg ☐ Plumb
☐ Fire ☐ Elevator
☒ Elect Plans Approved
 Date: 10/29/03
 Approved By: WJR
SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA
 Date: _____
 Approved By: _____

INSPECTIONS

Type Failure Dates (Month/Day)
 Rough Failure Approval Initial
 Temp Serv
 Const Serv
 TCO
 Other
 Service
 Final
 Temp. Cut-in-Card Date Issued
 Final Cut-in-Card Date Issued

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature
☐ Licensed Electrical Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	PFE (Office Use Only)
8		Lighting Fixtures	
20		Receptacles	
14		Switches	
4		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/P.A.C. Panel	
46		TOTAL NUMBERS	40
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0		KW Elect Range/Receptacle	0
0		KW Oven/Surface Unit	0
0		KW Elect Water Heater	0
0		KW Elect Dryer/Receptacle	0
0		KW Dishwasher	0
0		HP Garbage Disposal	0
0		KW Central A/C Unit	0
0		HP/KW Space Heater/Air Handler	0
0		Baseboard Heat	0
0		HP Motors 1/+ HP	0
0		KW Transformer/Generator	0
0		AMP Service	0
0		AMP Subpanels	0
0		AMP Motor Control Center	0
0		KW Elect Sign/Outline Light	0
0		Other	0
0		Other	0

Administrative Surcharge \$ 0
 Minimum Fee \$ 0
 TOTAL PFE \$ 40
 DCA State Permit Fee \$ 0

NJ UCCARS5.24E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 09/16/2003
Date Issued 10/29/03
Control # C19-88
Permit # 02-4857

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

Block 323.23 Lot 7 Qual
Work Site Location 224 KATIE LYNN CT

Owner in Fee CANNELLA, STEPHEN J
Address SAME

BRICK, NJ 08723-

Contractor STRICTLY ELECTRIC

Address 514 DOROTHY PLACE

BRICK, NJ 08723-

Tele. (732) 477-9260

Lic. No. or Bldgs. Reg. No. 13905A

Federal Emp. No. 22-3709311

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-5 Proposed R-5

[] Pole/Pad [] Temporary [] Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work \$ 3,700

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required:

[] Bldg [] Plumb

[] Fire [] Elevator

[] Elect Plans Approved

Date: 10/29/03

INSPECTIONS

Type Failure Dates (Month/Day)

Rough

Temp Serv

Const Serv

TCO

Other

Service

Final

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[] Licensed Electrical Contractor [] Erempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	PSE (Office Use Only)
8		Lighting Fixtures	
20		Receptacles	
14		Switches	
4		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/P.A.C. Panel	
46		TOTAL NUMBERS	40
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0		KW Elect Range/Receptacle	0
0		KW Oven/Surface Unit	0
0		KW Elect Water Heater	0
0		KW Elect Dryer/Receptacle	0
0		KW Dishwasher	0
0		HP Garbage Disposal	0
0		KW Central A/C Unit	0
0		HP/KW Space Heater/Air Handler	0
0		Baseboard Heat	0
0		HP Motors 1/4 HP	0
0		KW Transformer/Generator	0
0		AMP Service	0
0		AMP Subpanels	0
0		AMP Motor Control Center	0
0		KW Elect Sign/Outline Light	0
0		Other	0
0		Other	0

Administrative Surcharge \$ 0
Minimum Fee \$ 0
TOTAL PSE \$ 40
DCA State Permit Fee \$ 0

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 09/16/2003
Date Issued 10/29/03
Control # C19-88
Permit # 03-4857

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

Block 323.23 Lot 7 Qual

Work Site Location 224 KATIE LYNN CT

2ND STORY OVER GARAGE

Owner in Fee CANNELLA, STEPHEN J

Address SAME

BRICK, NJ 08723-

Contractor

Address

Tele. ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. HO-

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R-5 Proposed R-5

Constr Class Present Proposed

Heating Systems [] New [] Existing [] HVAC

Type: [] Gas [] Oil [] Elect [] Solar

[] Other

Location:

Total Est Cost of Fire Prot Work \$ 50

Fire Alarm System

New [] Existing []

Location of Panel:

Fire Suppression/Standpipe Sys

New [] Existing []

Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required:

[] Bldg [] Elect

[] Plumb [] Elevator

[] Fire Plans Approved

Date:

Approved By:

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date:

Approved By:

Dates (Month/Day)

Failure Failure Approval Initial

INSPECTIONS

Type

Alarm Sys

Suppr Test

Standpipe

Fire Pump

PreEng Sys

Mechanical

Smoke Ctl

TCO

Final

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.

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 NUMBER

[] System

Alarm Devices (smoke, heat, pulls, water/floor) 4

Supervisory Devices (tampers, low/high air) 0

Signalling Devices (horn/strobes, bells) 0

Other Devices CO DECT 1

TOTAL 5

Suppression Systems

Fire Pump 0 GPM Type 0

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 0

Smoke Control System 0

Gas [] or Oil [] Fired Appliances 10

Other 0

Other 0

Paid [] Check \$

Collected by: TOTAL FEE

Administrative Surcharge \$

Minimum Fee \$

DCA State Permit Fee \$

35

U.C.C. R140 (rev. 3/96)

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 09/16/2003
Date Issued 12 29/03
Control # C19-88
Permit # 05-4857

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING

CONTRACTORS. NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000

Block 323.23 Lot 7 Qual

Work Site Location 224 KATIE LYNN CT

Owner in Fee CANNELLA, STEPHEN J

Address SAME

Address BRICK, NJ 08723-

Address

Tele. ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. NO-

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present R-5 Proposed R-5

Constr Class Present Proposed

Heating Systems [] New [] Existing [] HVAC

Type: [] Gas [] Oil [] Elect [] Solar

[] Other

Location:

Total Est Cost of Fire Prot Work \$ 50

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required:

[] Bldg [] Elect

[] Plumb [] Elevator

[] Fire Plans Approved

Date:

Approved By:

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

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) 4

Supervisory Devices (tamper, low/high air) 0

Signalling Devices (horn/strobes, bells) 0

Other Devices CO DETC 1

TOTAL 5

Suppression Systems

Fire Pump 0 GPM Type 0

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 0

Smoke Control System 0

Gas [] or Oil [] Fired Appliances 10

Other 0

Other 0

Other 0

Other 0

Other 0

Other 0

Other 0

Other 0

Other 0

Other 0

Other 0

Other 0

Other 0

Other 0

Other 0

Administrative Surcharge \$ 0

Minimum Fee \$ 0

TOTAL FEE \$ 35

DCA State Permit Fee \$ 0

Paid [] Check \$

Collected by:

TOTAL FEE

DCA State Permit Fee

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

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 09/16/2003
Date Issued 10/29/03
Control # C19-88
Permit # 03-4857

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

Block 323.23 Lot 7 Qual
Work Site Location 224 KATIE LYNN CT

2ND STORY OVER GARAGE

Owner in Fee CANNELLA, STEPHEN J
Address SAME

BRICK, NJ 08723-

Tel. () Fax ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. HO-

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

2ND STORY ADDITION ABOVE GARAGE & FAMILY ROOM/PROPOSED 2 NEW BEDROOMS/
RE-LOCATION OF 1ST FLOOR FURNACE & HWY TO GARAGE/VINYL SIDING FOR WHOLE
HOUSE/NEW ROOF SHINGLES FOR ENTIRE HOUSE

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Failure	Approval	Initial
☒ No Plans Req.			Type				
☒ All	10/27/03		Footings				
☐ Footings			Foundation				
☐ Foundation			Slab				
☐ Frame			Frame				
☐ Other			BarrierFree				
Joint Plan Review Required:			Insulation				
☐ Elect ☐ Plumb ☐ Fire			Finishes				
SUBCODE APPROVAL ☐ Elev			Energy				
☐ CO ☐ CCO ☐ CA			Mechanical				
Date:			TCO				
Approved By:			Other				
			Final				
			BarrierFree				

B. BUILDING CHARACTERISTICS

Use Group	Present R-5	Proposed R-5	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed	1. New Bldg. \$ 39,000
No. of Stories	2		2. Alteration \$ 600
Height of Structure	25 Ft.		3. Total (1+2) \$ 39,600
Area Largest Floor	1,860 Sq. Ft.		Industrialized Building:
New Bldg. Area/All Floors	990 Sq. Ft.		☐ State Approved
Volume of New Structure	10,390 Cu. Ft.		☐ HUD
Total Land Area Disturbed	0 Sq. Ft.		

TYPE OF WORK	PEE (Office Use Only)
☐ New Building	\$ 0
☒ Addition	272
☒ Alteration	21
☐ Roofing	0
☐ Siding	0
☐ Fence	0
☐ Sign	0
☐ Pool	0
☐ Asbestos Abatement Subchapter 8	0
☐ Lead Haz. Abatement NJAC 5:17	0
☐ Other	0
☐ Demolition	0

Paid ☐ Check \$	Administrative Surcharge	\$ 0
Collected by:	Minimum Fee	\$ 0
	TOTAL FEE	\$ 293
	DCA State Permit Fee	\$ 30

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD.
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 09/16/2003
Date Issued 10/29/03
Control # C19-88
Permit # 03-4857

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

Block 323.23 Lot 7 Qual

Work Site Location 224 KATIE LYNN CT

2ND STORY OVER GARAGE

Owner in Fee CANNELLA, STEPHEN J

Address SAME

BRICK, NJ 08723-

Address

Address

Tele. () Fax ()

Lic. No. or Eldrs. Reg. No.

Federal Emp. No. NO-

Address

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

No Plans Req. 10/29/03

ALL

Footing

Foundation

Fram

BarrierFree

Insulation

Finishes

Energy

Mechanical

TCO

Other

Final

BarrierFree

R. BUILDING CHARACTERISTICS

Use Group Present R-5 Proposed R-5

Constr. Class Present Proposed

No. of Stories 2

Height of Structure 25 Ft.

Area Largest Floor 1,860 Sq. Ft.

New Bldg. Area/All Floors 990 Sq. Ft.

Volume of New Structure 10,890 Cu. Ft.

Total Land Area Disturbed 0 Sq. Ft.

Dates (Month/Day)

Failure Approval Initial

Type

Footing

Foundation

Slab

Fram

BarrierFree

Insulation

Finishes

Energy

Mechanical

TCO

Other

Final

BarrierFree

Est. Cost of Bldg. Work:

1. New Bldg. \$ 39,000

2. Alteration \$ 600

3. Total (1+2) \$ 39,600

Industrialized Building:

[] State Approved

[] HUD

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

2ND STORY ADDITION ABOVE GARAGE & FAMILY ROOM/PROPOSED 2 NEW BEDROOMS/
RE-LOCATION OF 1ST FLOOR FURNACE & HWY TO GARAGE/VINYL SIDING FOR WHOLE
HOUSE/NEW ROOF SHINGLES FOR ENTIRE HOUSE

FEE (Office Use Only)

\$

0

272

21

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

U.C.C. F110 (rev. 3/96)

Township of Brick
Counter Form
(PLEASE PRINT)

UPDATE 03-4857
DATE 11-17-03
INITIALED BY JB
FOR PLUMBING

Site Location: 224 Katie Lynn Court - Brick
Block: 323.23 Lot: 7
Owner's Name: STEPHEN J. CANNELLA
Owner's Mailing Address: 224 KATIE LYNN COURT
BRICK, NJ 08723
Phc [REDACTED]

BUILDING

Contractor: _____
Address: _____
Phone#: _____
Lis # _____
Federal Emp # or SSN _____

Technical Data

Description of Work: _____

Type of Work

☐ New Building	☐ Siding
☐ Addition	☐ Fence
☐ Alteration	☐ Pool
☐ Roofing	☐ Demolition
☐ Asbestos Abatement	☐ Sign _____ sq ft
☐ Fireplace wd/gas	

Building Characteristics

Use Group Present: _____ Proposed: _____
No of Stories: _____
Height of Structure: _____
Area of the largest floor: _____
Area of New Structure: _____
Volume of New Structure: _____
Total Land Disturbed: _____

Cost of Alteration: \$ _____

Cost of New Building: \$ _____

Cost of Site Work \$ _____

Total Cost of New Building Work: \$ _____

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

Signature: _____
Please Print Name _____

ELECTRICAL

Contractor: _____
Address: _____
Phone#: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data

Item	Quantity
------	----------

Lighting Fixtures	_____
Receptacles	_____
Switches	_____
Detectors	_____
Light Poles	_____
Motors w/ Fract. HP	_____
Emergency & Exit Lights	_____
Communication Points	_____
Alarm Devices/FAC Panel	_____
Total	_____

Pool (Receptacles, Switches, Lights, Motor 1HP)	_____
Spa/Hot Tub/Storable Pool	_____
Electric Range	KW
Oven/Surface Unit	KW
Electric Water Heater	KW
Electric Dryer	KW
Dishwasher	KW
Garbage Disposal	HP
A/C Unit - Central Air	KW
Space Heater/Air Handler	KW
Baseboard Heating	KW
Motors 1+ HP	_____
Transformer/Generator	KW
Light Stander	AMP
Service	AMP
Subpanel	AMP
Motor Control Center	AMP
Sign/Outline Light	KW
Furnace	_____
Steam Boiler	_____
Other:	_____

Estimated Cost of Electrical Work: _____

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

Signature: _____
Please Print Name _____

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

FIRE

Contractor: Stephen J. Cannella (Homeowner)
Address: 224 Katie Lynn Court
BRICK NJ 08723
Phone #: [REDACTED]
Lis #: N/A
Federal Emp # or SSN N/A

Contractor: _____
Address: _____
Phone #: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data

Fixtures	Quantity
Water Closets (Toilet)	
Urinals/Bidets	
Bath Tub (w/or w/out shower head)	
Lavatory (BR Sink)	
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bib	
Gas Piping	<u>50 feet</u>
Fuel Oil Piping	
Water Heater	<u>(1)</u>
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	
Greasetrap	
Air Conditioner (Condensate Drain)	<u>(2)</u>
Septic Tank Closure	
Sewer Service Connection	
Water Service Connection	
Active Solar System	
Auxiliary Meter	
Sprinkler Heads	
Sump Pump	
Pool Heater	
Other:	

All documentation provided with original application for:
a) relocation of furnace, hot water heater from existing utility room to garage (1st floor system)
b) installation of new HVAC system for 2nd floor
Estimated Cost of Plumbing Work \$500

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

Signature: [Signature]
Please Print Name: Stephen J. Cannella
(Homeowner)

CONTRACTOR'S SEAL

Technical Data

Description of Work:

Heating Type: Gas Oil Electric Solar
Heating System is New Existing
Location of Furnace/Boiler: _____
Water Supply Source _____
Method of Valve Supervision _____
Local Alarm Supervision _____
Central Supervision: _____
Proprietary Supervision: _____

	capacity	fuel
Flammable Storage Tanks		
Combustible Storage Tanks		
LPG Storage Tanks		

Item	Quantity
Wet Sprinkler Heads	
Dry Sprinkler Heads	
Total	

Smoke Detectors _____
Heat Detectors _____
Total _____

Stand Pipes _____
Kitchen Hood Exhaust System _____

Pre-Engineered Systems:
CO2 Suppression _____
Halon Suppression _____
Foam Suppression _____
Dry Chemical _____
Wet Chemical _____

Gas/ Oil Fired Appliances:
Gas Stove _____
Gas Dryer _____
Furnace (Gas or Oil) _____
Gas Fireplace _____
Gas Logs _____
Total Appliances _____

Wood Burning Stove _____
Wood Fireplace _____
Other: _____

Estimated Cost of Fire Work _____

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

Signature: _____
Print Name: _____

Counter Form
PLEASE PRINT

PLUMBING

Contractor: _____
Address: _____
Phone #: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data

Fixtures _____ Quantity _____
Water Closets _____
Urinals/Bidets _____
Bath Tub (w/ or w/out shower head) _____
Lavatory (BR Sink) _____
Shower _____
Floor Drain _____
Sink _____
Dishwasher _____
Drinking Fountain _____
Washing Machine _____
Hose Bib _____
Gas Piping _____
Fuel Oil Piping _____
Water Heater _____
Steam Boiler _____
Hot Water Boiler _____
Sewer Pump _____
Interceptor/Separator _____
Backflow Preventer _____
Greasetrap _____
Air Conditioner (Condensate Drain) _____
Septic Tank Closure _____
Sewer Service Connection _____
Water Service Connection _____
Active Solar System _____
Auxiliary Meter _____
Sprinkler Heads _____
Sump Pump _____
Pool Heater _____
Other: _____

Estimated Cost of Plumbing Work _____

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

Signature: _____

Please Print Name: _____

CONTRACTOR'S SEAL

FIRE

Contractor: _____
Address: _____
Phone #: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data

Description of Work: _____

Heating Type: _____ Gas _____ Oil _____ Electric _____ Solar _____
Heating System is _____ New _____ Existing _____
Location of Furnace/Boiler: _____
Water Supply Source _____
Method of Valve Supervision _____
Local Alarm Supervision _____
Central Supervision: _____
Proprietary Supervision: _____
Flammable Storage Tanks _____ capacity _____ fuel _____
Combustible Storage Tanks _____ capacity _____ fuel _____
LPG Storage Tanks _____ capacity _____ fuel _____

Item	Quantity
Wet Sprinkler Heads	_____
Dry Sprinkler Heads	_____
Total	_____
Smoke Detectors	4 Smokes
Heat Detectors	1 CO Det.
Total	_____

Stand Pipes _____
Kitchen Hood Exhaust System _____

Pre-Engineered Systems:
CO2 Suppression _____
Halon Suppression _____
Foam Suppression _____
Dry Chemical _____
Wet Chemical _____

Gas/ Oil Fired Appliances:
Gas Stove _____
Gas Dryer _____
Furnace (Gas or Oil) _____
Gas Fireplace _____
Gas Logs _____
Total Appliances _____

Wood Burning Stove _____
Wood Fireplace _____
Other: _____

Estimated Cost of Fire Work \$ 50 -

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

Signature: _____

Print Name: Stephen J. Cannella

Township of Brick

Counter Form
(PLEASE PRINT)

Site Location: 224 KATIE LYNN COURT - BRICK
Block: 323.23 Lot: 7
Owner's Name: STEPHEN J. CANNELLA
Owner's Mailing Address: 224 KATIE LYNN COURT
BRICK, N.J. 08723
Phone: [REDACTED]

BUILDING

Contractor: STEPHEN J. CANNELLA (Homeowner)
Address: 224 KATIE LYNN COURT
BRICK, N.J. 08723
Phone#: [REDACTED]
Lis # N/A
Federal Emp # or SSN N/A

ELECTRICAL

Contractor: STRICTLY ELECTRIC
STRICTLY ELECTRIC, INC.
614 Dorothy Pl
Brick NJ 08723
Address: [REDACTED]
Phone#: 732-477-9280
Lis #: LIC #13905A
Federal Emp # or SSN [REDACTED]

Technical Data

Description of Work:

- 2ND story addition above garage & family room (approximately 500 sq. ft. of new living space) - proposed 2 new bedrooms
- re-location of 1ST floor furnace and hot water heater from existing utility/laundry room to garage
- installation of new HVAC system for ~~new~~ entire 2ND floor (existing and proposed)
- new vinyl siding for entire house
- new roof shingles for entire house

Type of Work
New Building ☐ Siding ☐
☒ Addition ☐ Fence ☐
☐ Alteration ☐ Pool ☐
☐ Roofing ☐ Demolition ☐
☐ Asbestos Abatement ☐ Sign ☐ sq ft
☐ Fireplace wd/gas

Building Characteristics

Use Group Present: Single Family Proposed: Single Family
No of Stories: 2
Height of Structure: 25 ft. (match existing)
Area of the largest floor: 1586 sq. ft. 1800 sq. ft.
Area of New Structure: 990 sq. ft.
Volume of New Structure: 7720 cu. ft. 10,890 cu. ft.
Total Land Disturbed: 0

Cost of Alteration: \$ [REDACTED]

Cost of New Building: \$ [REDACTED]

Cost of Site Work \$ [REDACTED]

Total Cost of New Building Work: \$ 36,000

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

Signature: [Signature]

Please Print Name STEPHEN J. CANNELLA

Technical Data

Item	Quantity
Lighting Fixtures	<u>8</u>
Receptacles	<u>20</u>
Switches	<u>14</u>
Detectors	<u>4</u>
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	
Alarm Devices/FAC Panel	
Total	

Pool (Receptacles, Switches, Lights, Motor 1HP) [REDACTED]
Spa/Hot Tub/Storable Pool [REDACTED]
Electric Range [REDACTED] KW
Oven/Surface Unit [REDACTED] KW
Electric Water Heater [REDACTED] KW
Electric Dryer [REDACTED] KW
Dishwasher [REDACTED] KW
Garbage Disposal [REDACTED] HP
A/C Unit - Central Air [REDACTED] KW
Space Heater/Air Handler [REDACTED] KW
Baseboard Heating [REDACTED] KW
Motors 1+ HP [REDACTED]
Transformer/Generator [REDACTED] KW
Light Stander [REDACTED] AMP
Service [REDACTED] AMP
Subpanel [REDACTED] AMP
Motor Control Center [REDACTED] AMP
Sign/Outline Light [REDACTED] KW
Furnace [REDACTED]
Steam Boiler [REDACTED]
Other: [REDACTED]

Estimated Cost of Electrical Work: \$ 3700.00

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

Signature: [Signature]

Please Print Name JOHN M. STRICH

CONTRACTOR'S SEAL

**BOCA®
NATIONAL BUILDING CODE
PLAN REVIEW RECORD**

Valuation: _____

Plan Review # _____

Fee: _____

Date: 10-20-03

JURISDICTION _____

BUILDING LOCATION 224 Katie Lynn Ct.
(City, County, Township, etc.)
(Street address)

BUILDING DESCRIPTION _____ RESUBMIT

REVIEWED BY _____ **DATE** 10-21-03

Numerals indicated in parenthesis are applicable code sections of the 1993 BOCA National Building Code. The organization of this Plan Review Record follows the common Building Code format implemented in the 1993 BOCA National Building Code. The plan review accomplished as indicated in this record is limited to those code sections specifically identified herein. This record references commonly applicable code sections. It does not reference all code provisions which may be applicable to specific buildings. This record is designed to be used only by those who are knowledgeable and capable of exercising competent judgement in evaluating construction documents for code compliance.

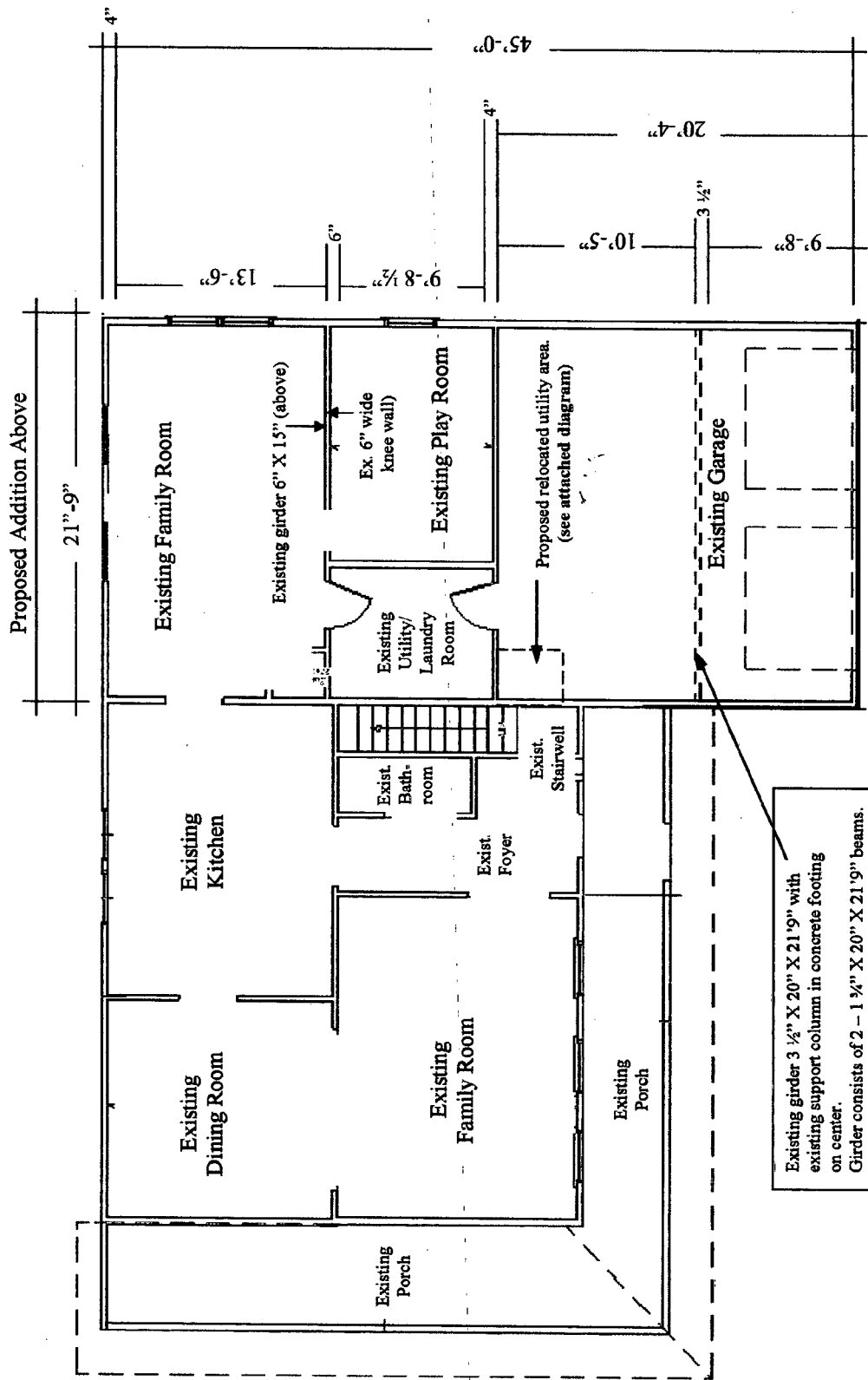
CORRECTION LIST

No.	DESCRIPTION	Code Section
①	FTO Requires Rated Ceiling to be supported by Rated Walls (Not shown)	
②	Relocated Utility Area shows No Details Framing, Height off Floor & impact Protection	
③	Cross Section Drawing shows Floor in Garage at same Elevation as dwelling	
④	Ridge Size Not indicated.	
⑤	Soffit & Ridge vents Not shown	
<u>HO took plans</u>		<u>called HO 12:50 spoke to wife</u>



Copyright, 1993, Building Officials and Code Administrators International, Inc. Reproductions by any means is prohibited. BOCA® is the trademark of Building Officials and Code Administrators International, Inc., and is registered in the U.S. Patent and Trademark Office. NOTE: In order that we might develop other programs and provide additional services of benefit to the Code Administration profession, please re-order additional copies of this form from:

**BUILDING OFFICIALS AND CODE ADMINISTRATORS INTERNATIONAL, INC.
4051 W. FLOSSMOOR ROAD COUNTRY CLUB HILLS, ILLINOIS 60478-5795**



EXISTING FIRST FLOOR

All revisions are shown in red.

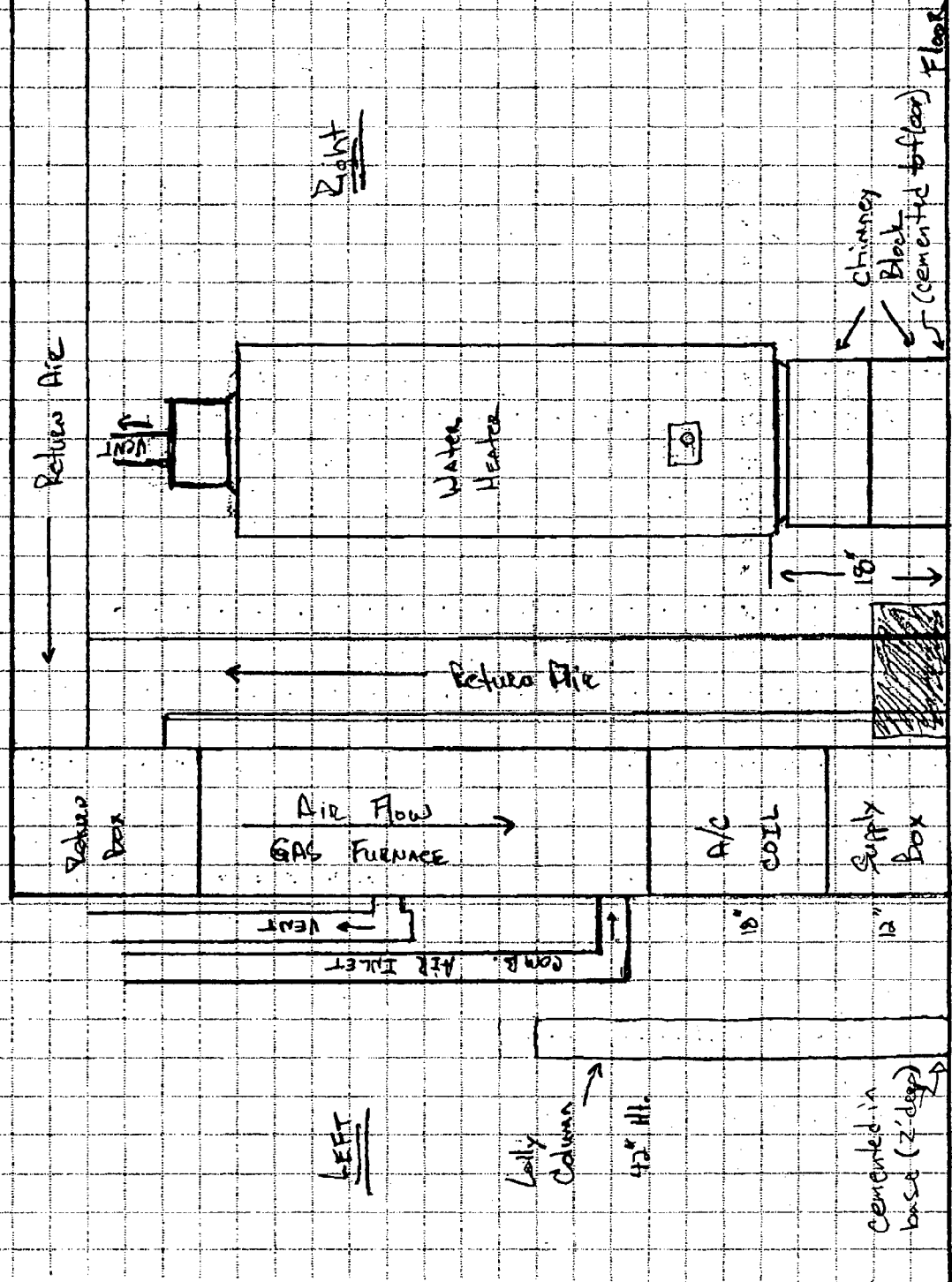
Proposed 2nd Floor Addition
 Block 323.23, Lot 7
 Rev. 1
 Brick, New Jersey

DATE: October 21, 2003
 DRAWN BY: *STC*

Stephen J. Cannella
 224 Katie Lynn Court
 Brick, New Jersey 08723
Stephen J. Cannella 10/21/03

File: 732-262-2179

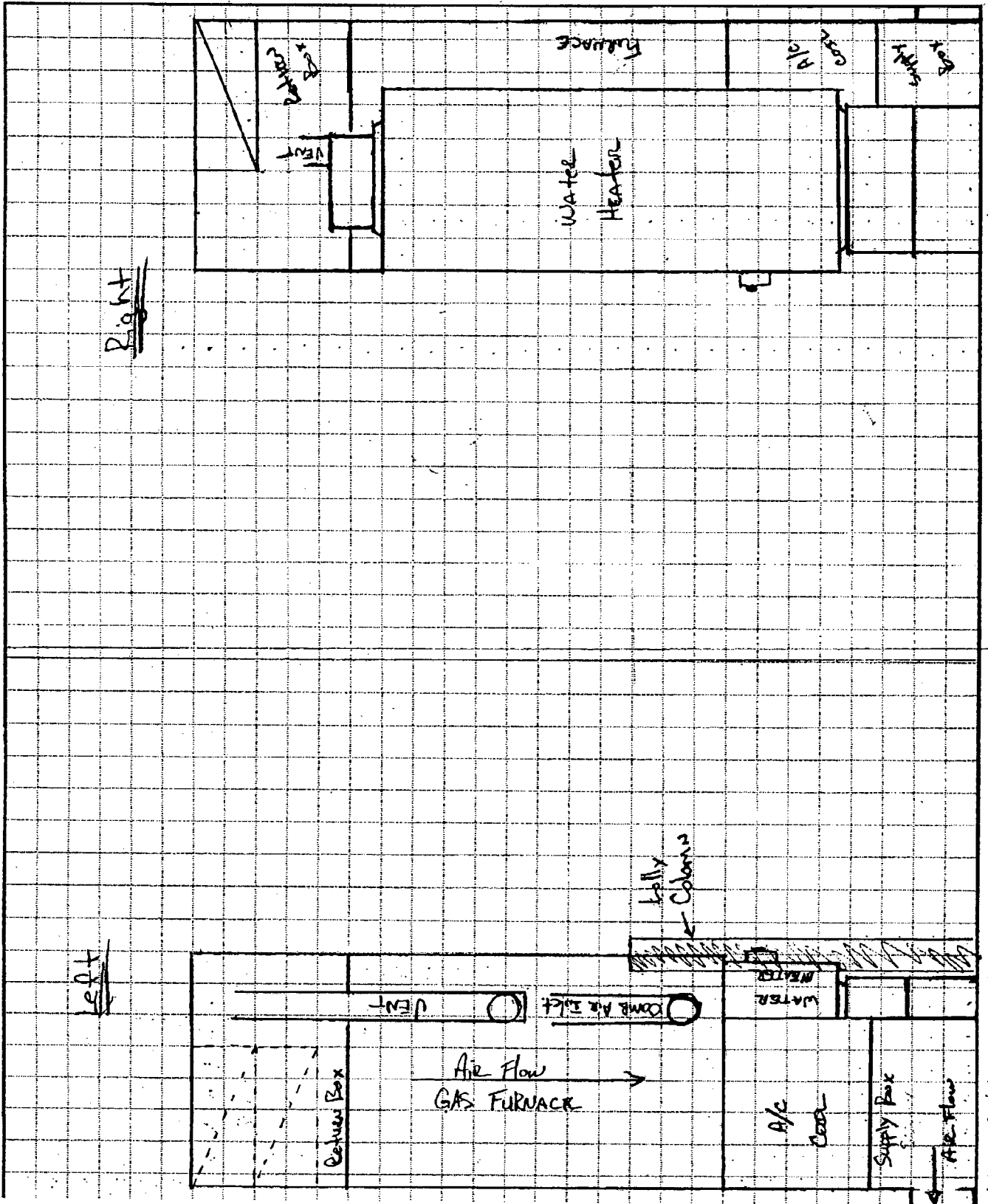
Front View



PROPOSED RELOCATED UTILITY AREA - FRONT VIEW
(1 of 3)

DATE: October 21, 2003
DRAWING: SJC

10/21/03

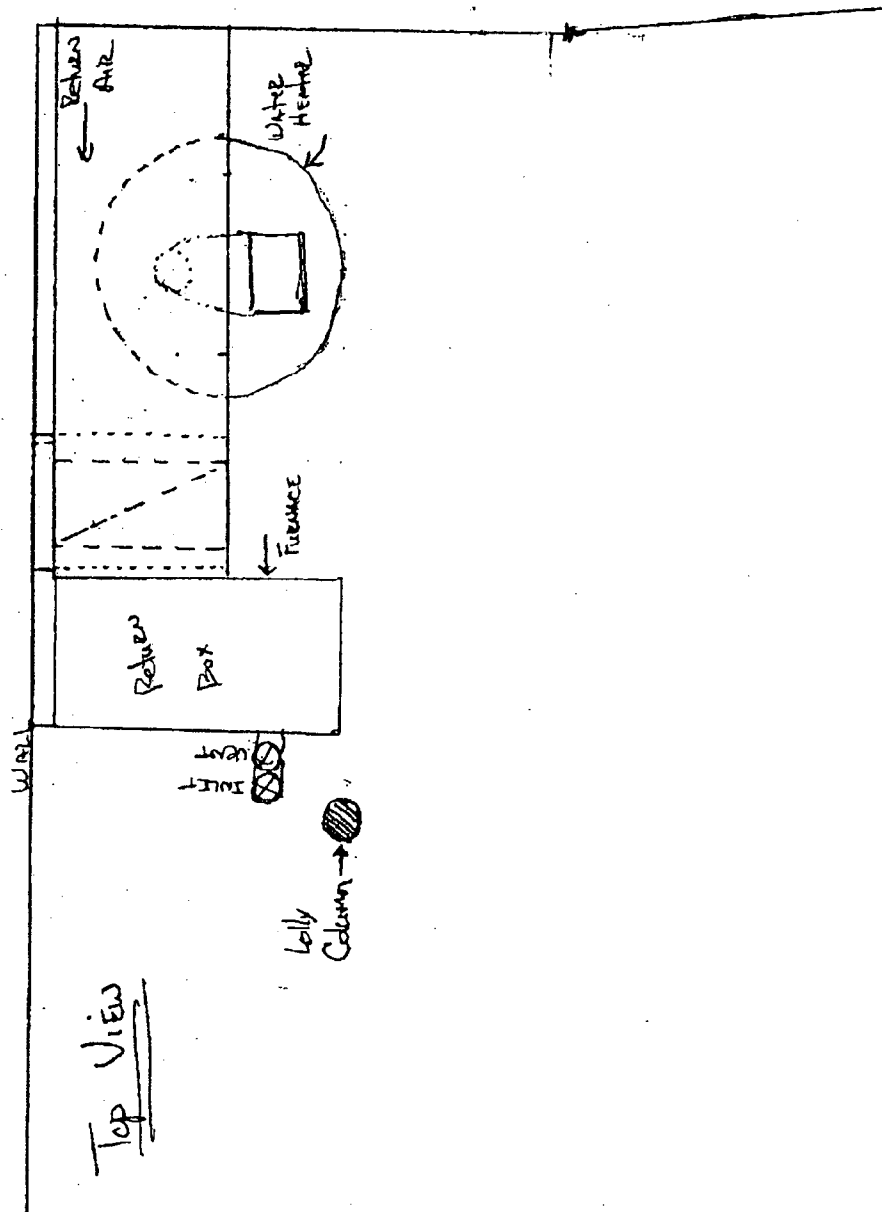


DATE: October 21, 2003
 DRAWN BY: STC

PROPOSED RELOCATED UTILITY AREA - LEFT & RIGHT VIEWS
 (2 of 3)

10/21/03

Handwritten signature/initials.



PROPOSED RELOCATED UTILITY AREA - TOP VIEW
(3 of 3)

10/21/03
M. J. C. C.
DATE: October 21, 2003
DEPARTMENT: SOC

10/21/2022

10-27-03 FR

21"-9"



Proposed ballister railing
3'0" high installed to code

PROPOSED 2nd STORY ADDITION

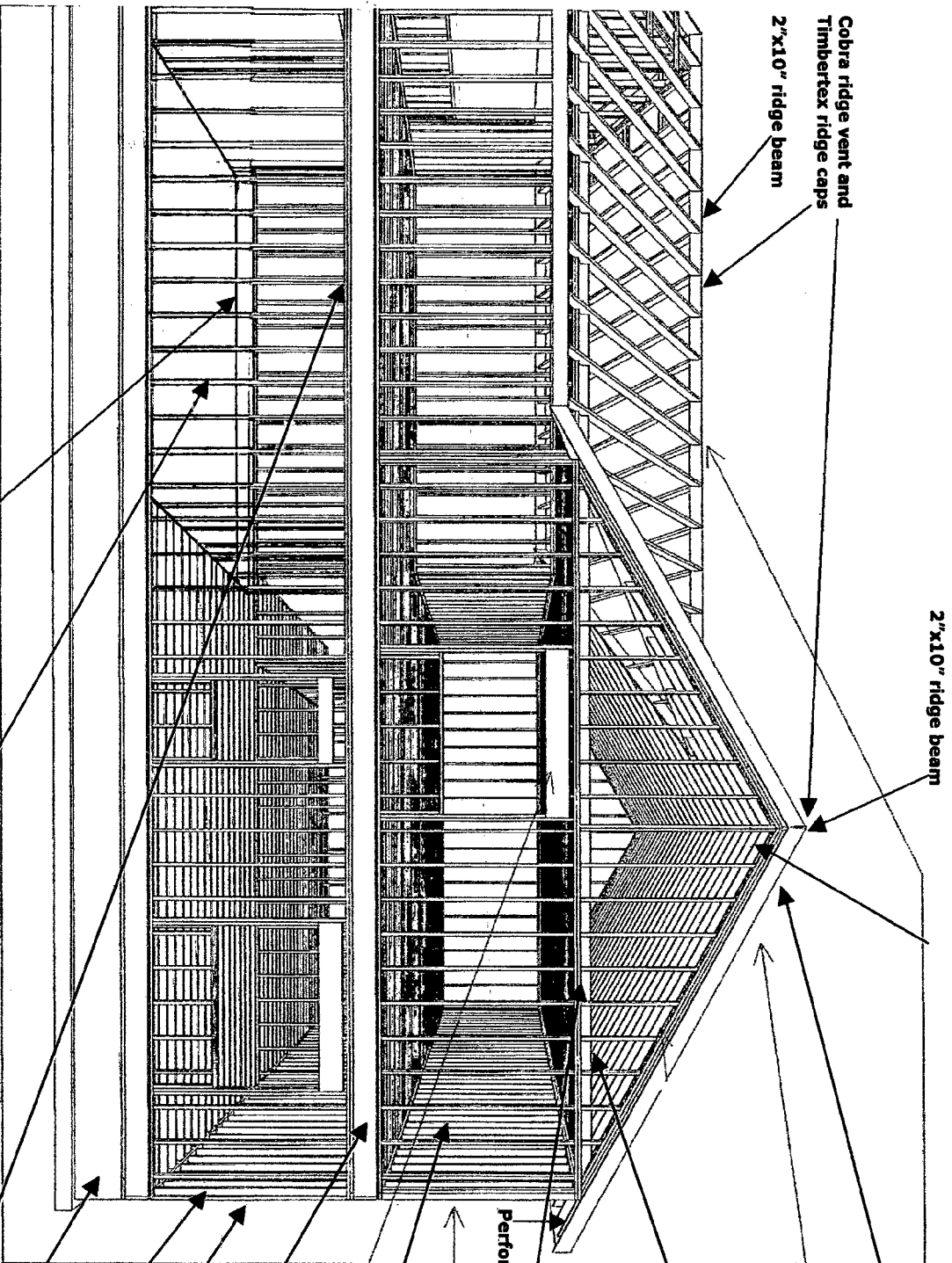
[Signature]
9/12/05

Plan Review _____ Brick Township _____
Zoning _____ Class _____ Date _____
Plumbing _____
Building _____
Fire _____
Electrical _____

By

10-27-03 KIM

10803 W



Cobra ridge vent and
Timbertex ridge caps
2"x10" ridge beam

2"x10" ridge beam

2x8 Roof rafters @ 16" O.C.
Proposed roof pitch to match
existing roof
30 year asphalt roof shingles
over felt paper on 1/2" CDX
plywood

R-19 fiberglass insulation

6" alum. fascia

2" X 6" ceiling beams @ 16" OC
Perforated (vented) vinyl soffit
2" X 4" wood stud wall
construction @ 16" OC
with R-13 wall insulation

1/2" Drywall (interior wall and
ceiling)

Doubled - 2x12 window
headers

2" X 10" floor joists @ 16" OC
with 3/4" T&G plywood
flooring

Vinyl siding over building
paper on 1/2" CDX plywood

Existing first floor

Existing 16" x 8" concrete footing
and concrete block (5 course)

New 5/8" fire code drywall
garage ceiling - 2 layers

Existing garage
New 5/8" fire rated drywall
garage walls - 1 layer

Proposed 2nd Floor Addition
Rev. 1
Block 323.23, Lot 7
Brick, New Jersey

All revisions are
shown in red.

Cross Section

SCALE: 1/8" = 1'

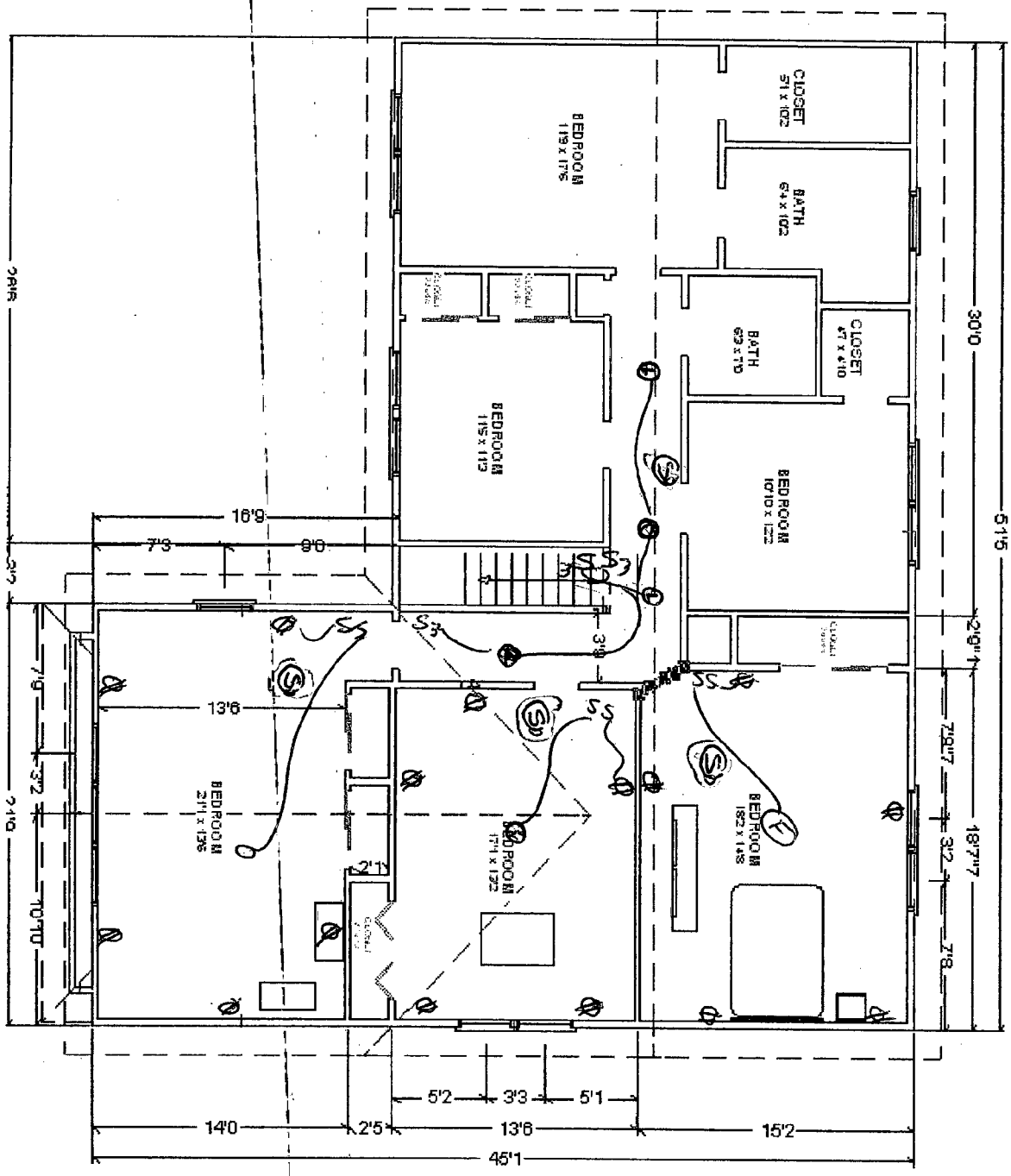
DATE: October 21, 2003
DRAWN BY: SJT

Stephen J. Cannella
224 Katie Lynn Court
Brick, New Jersey 08723

Stephen J. Cannella
10/21/03

10-27-03 FM

- ⑦ - Lights - 7
- ⑤ - SMOKE ALARMS @/R - 4
- S - Switch 6
- S3 - 3WAY SW 3



Handwritten signature
9/16/03

Proposed 2000 sq ft Home Addition
Block 323.23, Lot 7
Brick, New Jersey

Detailed Electrical Layout

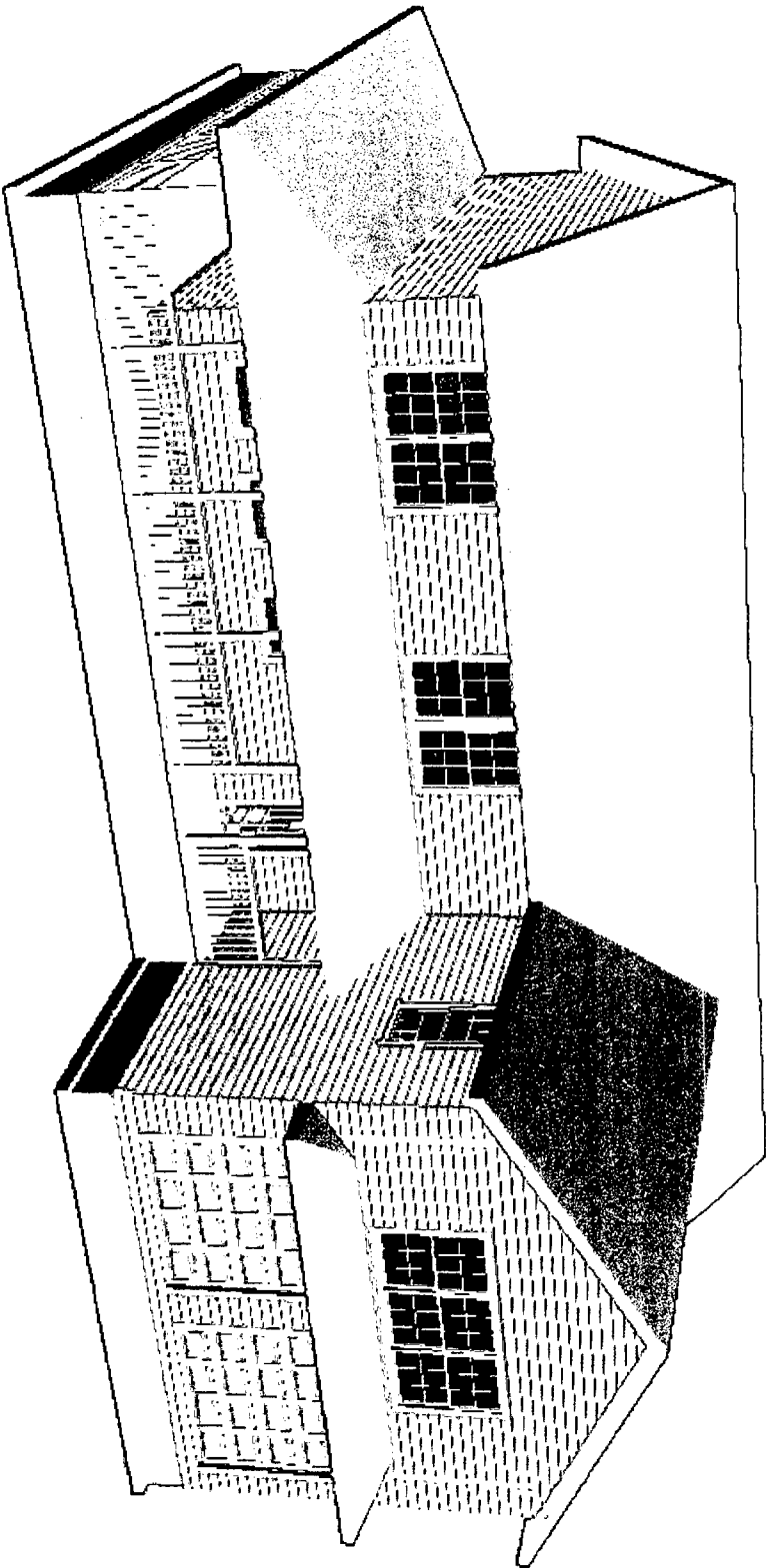
Date: September 16, 2003

Handwritten signature
9/16/03

Stephen J. Cannella
234 Katie Lynn Court
Brick, NJ 08723
Handwritten signature

Plan Review _____ Brick Township
Zoning _____ Class _____ Date _____ By _____
Plumbing _____
Building _____
Fire _____
Electrical 10903 MW

FRONT ELEVATION



Proposed 2nd Floor Addition
Block 323.23, Lot 7
Brick, New Jersey

DATE: September 12, 2003
DRAWN BY: SJC

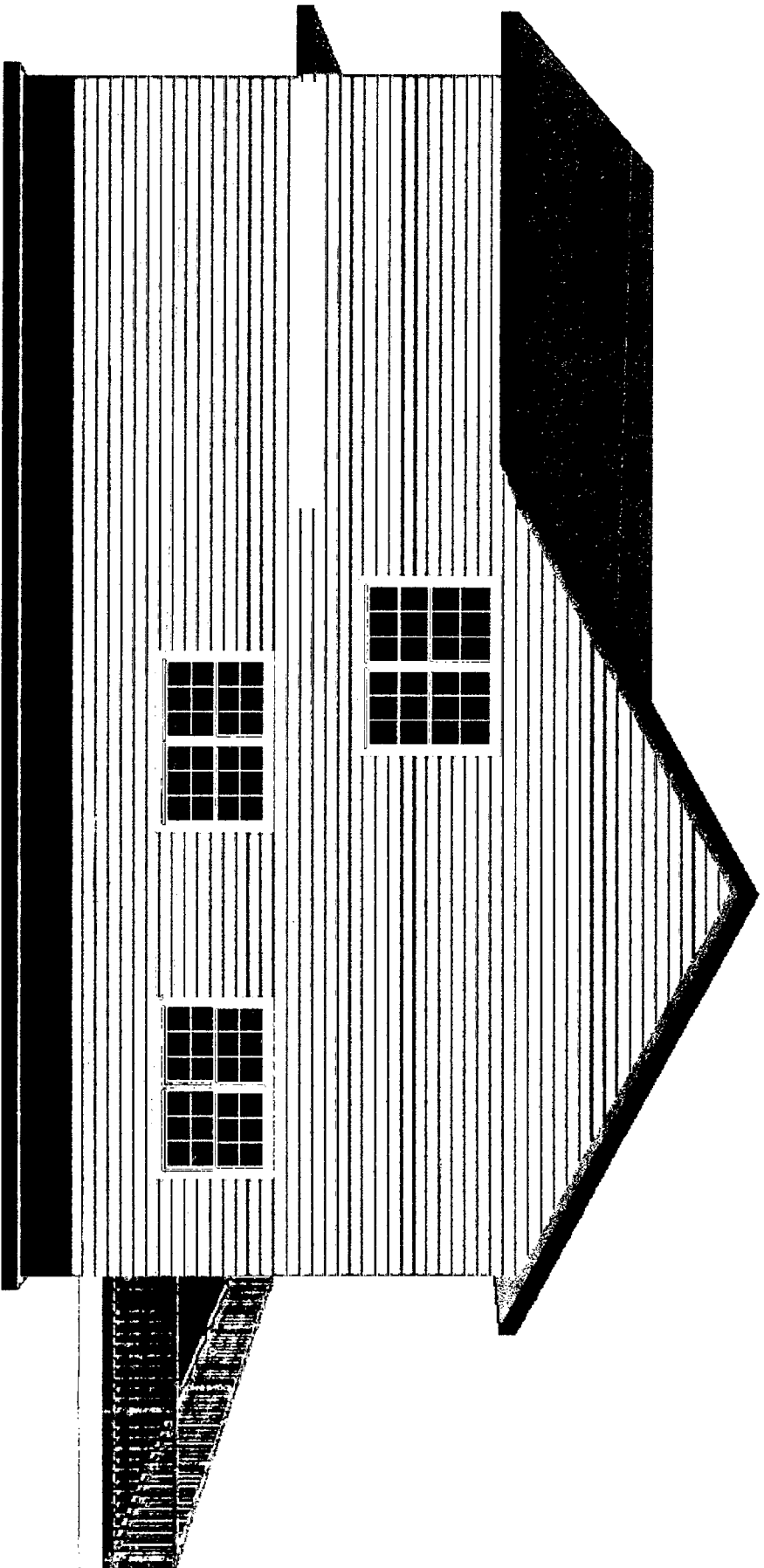
Stephen J. Cannella
224 Katie Lynn Court
Brick, New Jersey 08723

Stephen J. Cannella
9/12/03

AD 11-10-1941

	Brick Township		
Plan Review	Class	Date	By
Zoning			
Plumbing			
Building			
Fire			
Electrical	10903		M

SIDE ELEVATION



Proposed 2nd Floor Addition
Block 323.23, Lot 7
Brick, New Jersey

DATE: September 12, 2003
DRAWN BY: SJC

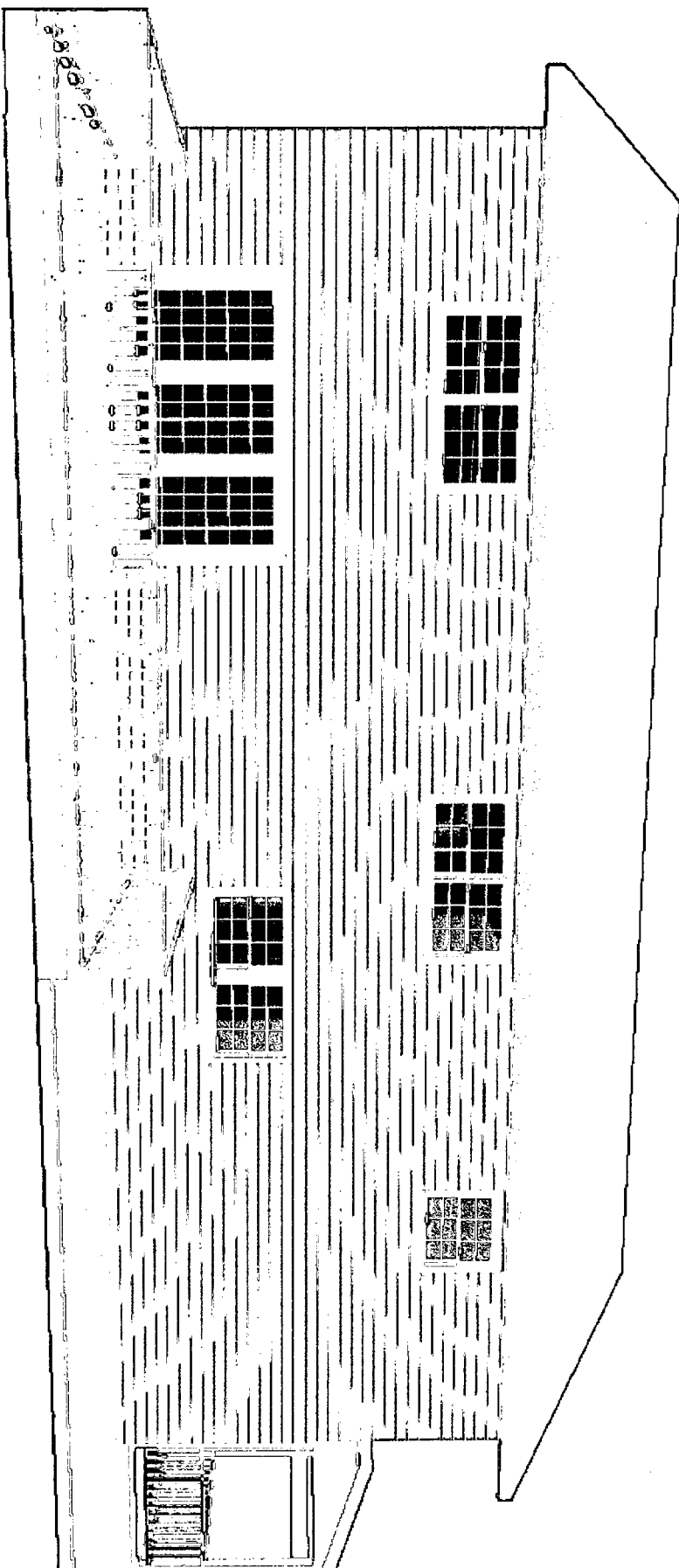
Stephen J. Cannella
224 Katie Lynn Court
Brick, New Jersey 08723

Stephen J. Cannella
9/12/03



Plan Review _____ Brick Township
Zoning _____ Class _____ Date _____ By _____
Plumbing _____
Building _____
Fire _____
Electrical 10803 MW

REAR ELEVATION



Proposed 2nd Floor Addition
Block 323.23, Lot 7
Brick, New Jersey

DATE: September 12, 2003
DRAWN BY: SJC

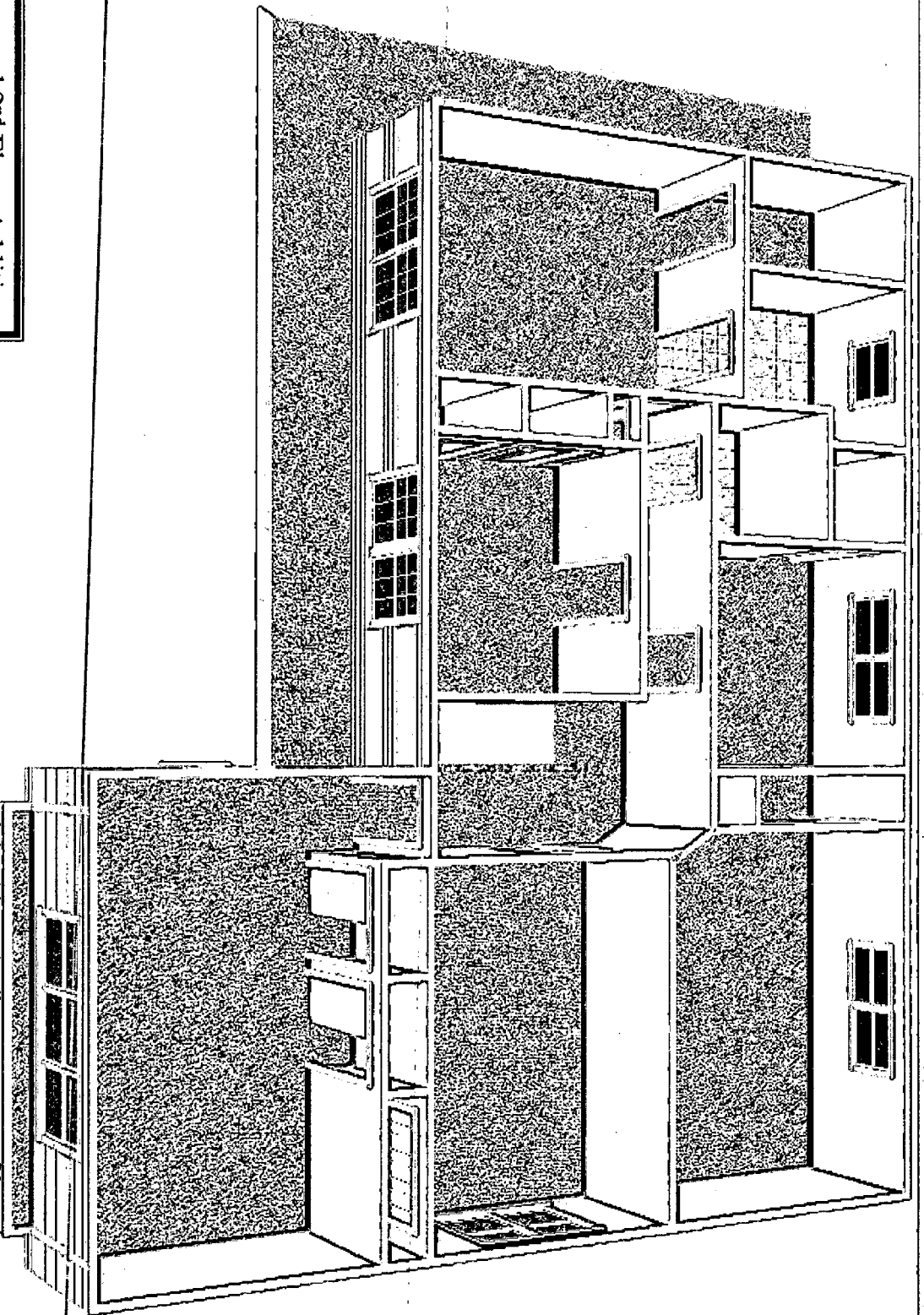
Stephen J. Cannella
224 Katie Lynn Court
Brick, New Jersey 08723

Stephen J. Cannella
9/12/03

2021-01-14 10:10:10

	Brick Township		
Plan Review	Class	Date	By
Zoning			
Plumbing			
Building			
Fire			
Electrical	1080's		W

2ND FLOOR INTERIOR VIEW



Proposed 2nd Floor Addition-
Block 323.23, Lot 7
Brick, New Jersey

DATE: September 12, 2003
DRAWN BY: SJL

Stephen J. Cannella
224 Katie Lynn Court
Brick, New Jersey 08723

Stephen J. Cannella
9/12/03

Brick Township
Plan Review Class Date By
Zoning _____
Plumbing _____
Building _____
Fire _____
Electrical 10803 MM

National Fire Code
Plan Review Record
Township of Brick

Date: 10-8-23

Site Address: 224 Lantier Lane Ct.

Reviewed By: [Signature]

CORRECTION LIST

No.

Description

1) verify existing SD's yes

2) new tube interconnected to existing [initials]

10-8-23
Stephen Cannella
(732) 262-2666
2050 PM

Party Called and Phone #: _____

Resubmitted on: _____

By: _____

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

401 CHAMBERS BRIDGE ROAD • BRICK, NJ 08723

Joseph C. Scarpelli, Mayor

Township Council:

Kimberley S. Casten — President
Stephen C. Acropolis
Steven M. Cucci
Gregory S. Kavanagh
Kathy M. Russell
Anthony R. Shupin
Frederick J. Underwood, Sr.



Department of Administration & Finance

Division of Inspections

Daniel F. Newman Jr.

Construction Official

(732) 262-1030

Fax: (732) 262-8954

<http://www.twp.brick.nj.us>

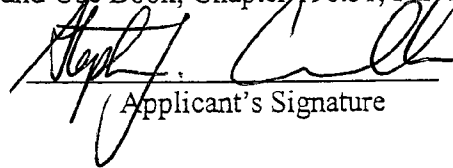
Date: September 15, 2003

Block: 323.23 Lot: 7

Property Address: 224 Katie Lynn Court - Brick

I, Stephen J. Cannella of 224 Katie Lynn Court - Brick
(name) (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, ect. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.


Applicant's Signature

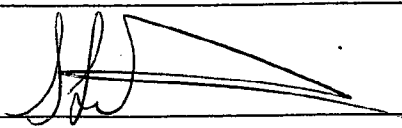
The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Dimensions of the 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.

FOR OFFICE USE ONLY

Approved on: 9/25/03

Signed: 

Rejected on: _____

Signed: _____

Comments:

**Township of Brick
Zoning Permit**

Approved: Monday, September 22, 2003 **Number:** 1665

Block 323.23 **Lot** 7 **Zone:** R-R-2 (R-10)

Property Address: 224 Katie Lynn Court

Applicant: Stephen J. Cannella

Property Owner: Stephen J. Cannella

Existing Use: Single Family Residential

Proposed Use: Single Family Residential

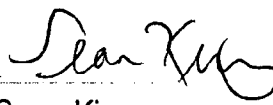
Proposed Construction: Second floor addition, 22' x 44', 25' high.

Conditions: Same footprint as first floor, same height as existing second floor.

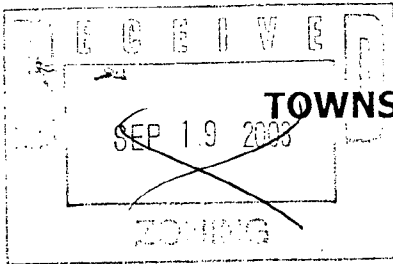
This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis that this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.



Michael P. Fowler, AICP/PP
Municipal Planner



Sean Kinnevy
Zoning Officer



TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

(Please Type or Print Neatly in Ink, Not Pencil)

Applications missing any of the following information
will delay processing and may be returned to you.

BLOCK 323.23 LOT 7 QUALIFIER _____

PROPERTY ADDRESS 224 KATIE LYNN COURT - BRICK

PERSONAL NAME OF APPLICANT STEPHEN J. CANNELLA (Homeowner)

BUSINESS NAME OF APPLICANT _____

MAILING ADDRESS OF APPLICANT 224 KATIE LYNN COURT - BRICK, N.J. 08723

PROPERTY OWNER'S FULL NAME STEPHEN J. CANNELLA

PRESENT USE OF PROPERTY (check all that apply)

- ☐ Vacant Lot ☒ Single-family dwelling ☐ Multi-family dwelling
☐ Commercial (please describe) _____

PROPOSED USE OF PROPERTY (check all that apply)

- ☐ Vacant Lot ☒ Single-family dwelling ☐ Multi-dwelling
☐ Commercial (please describe) _____

PROPOSED CONSTRUCTION (check all that apply)

- ☐ New Building (please describe) _____ Height _____
☒ Addition - Height 25 ft. (match existing structure)
☐ Alteration _____
☐ Porch or deck - Height _____
☐ Shed - Height _____
☐ Fence - Type _____ Height _____
☐ Swimming Pool ☐ in-ground ☐ above-ground
☐ Other (please describe) _____

CHECKLIST

- ☒ All information completed above
☒ Two (2) copies of a plot plan containing:
☒ All existing and proposed structures
☒ All dimensions of the lot and structures
☒ All setbacks from the structures to the property lines
☒ All adjacent streets and waterways

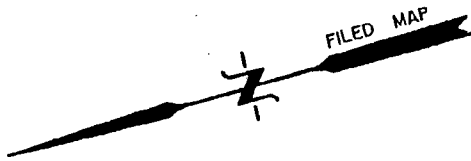
- ☒ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

Note: No partial, taped, faxed,
reduced or enlarged copies
can be accepted.

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

SIGNATURE OF APPLICANT Stephen J. Cannella Date September 15, 2003

Reviewed by Zoning Office _____ Date 9/22/03 Approved () Denied



LOT 13

S 18° 12' 35" W 90.08' .50'

THIS SURVEY IS CERTIFIED TO:

STEPHEN CANNELLA & LUCILLE CANNELLA, H/W

DIME MORTGAGE OF NEW JERSEY, INC. ITS SUCCESSORS
AND/OR ASSIGNS AS THEIR INTEREST MAY APPEAR

KENTWOOD FINANCIAL SERVICES

SELECT TITLE AGENCY, INC. (ST-6613)

NATIONS TITLE INSURANCE OF NEW YORK, INC.

LAW OFFICES OF DESMOND R. ABZIA, P.C.

KAREN A. OSTBERG, ESQUIRE

LOT 6

191.80'

WOOD PICKET FENCE

BLOCK 323.23
LOT 7

CONTAINS 0.392 ACRES

Proposed 2ND story addition
does not change setbacks
of existing structures.
No land area disturbed.

187.94'

LOT 8

BEING KNOWN AS LOT 7 IN BLOCK 323.23 AS
SHOWN ON A MAP ENTITLED, "FINAL PLAT MAJOR
SUBDIVISION TAX LOTS 23, 24, & 38 IN BLOCK 323,
CIRCLE ESTATES" AND FILED IN THE OCEAN COUNTY
CLERK'S OFFICE ON NOVEMBER 20, 1989 AS MAP
NUMBER 1-2244.

ALSO BEING KNOWN AS LOT 7 IN BLOCK 323.23 AS
SHOWN ON THE OFFICIAL TAX MAPS OF THE
TOWNSHIP OF BRICK, OCEAN COUNTY, NEW JERSEY.

S 74° 14' 53" E

N 74° 14' 53" W

Free standing
Wood Deck
existing

TWO STORY
FRAME
W/ GARAGE
30'x22'

PORCH W/ ROOF

CONC. WALK

CONC. APRON

PROPOSED
BLACKTOP
DRIVE

N 15° 45' 07" E

90.00'

KATIE LYNN (50') COURT

CIRCLE (41.50') DRIVE

NOTE: NO PROPERTY CORNERS HAVE BEEN SET AS PER CONTRACTUAL
AGREEMENT WITH THE OWNER OR HIS AGENT.

TO ANY INSUROR OF TITLE RELYING HEREON AND ANY OTHER
ARTY IN INTEREST," IN CONSIDERATION OF THE FEE PAID FOR
MAKING THIS SURVEY, I HEREBY CERTIFY TO ITS ACCURACY
EXCEPT SUCH EASEMENTS, IF ANY, THAT MAY BE LOCATED BELOW
THE SURFACE OF THE LANDS OR ON THE SURFACE OF THE LANDS
THAT ARE NOT VISIBLE) AS AN INDUCEMENT FOR ANY INSUROR
OF TITLE TO INSURE THE TITLE TO THE LANDS AND PREMISES
SHOWN HEREON. THIS RESPONSIBILITY LIMITED TO THE CURRENT
OWNER AS OF THE DATE OF THIS SURVEY.

OFFSETS AS SHOWN HEREON ARE NOT TO BE USED AS A BASIS FOR
CONSTRUCTION OF FENCES OR OTHER PERMANENT STRUCTURES.

6/12/96
DATE

FRANK J. ERNST

PROFESSIONAL LAND SURVEYOR N.J. LIC. NO. 28305
PROFESSIONAL PLANNER N.J. LIC. NO. 2864

PLAN OF SURVEY

SITUATE

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY

BLOCK 323.23 LOT 7

SENECA SURVEY CO., INC

SURVEYORS & PLANNERS

1054 RIVER ROAD
LAKEWOOD, NEW JERSEY 08701

(908) 901-1555

Date: JUNE 12, 1996

Scale: 1" = 30'

Drawn by: DBF

Proj. No.: 96-7465

APPROVED FOR ZONING ONLY
SEAN KINNEVY, ZONING OFFICER
DATE 9-22-3 *AK*

Applicable to Ordinance 720-92

This form must be handed in with permit application or a permit will not be issued

TOWNSHIP OF BRICK
Debris Form

Work Site Address: 224 Katie Lynn Court

Block: 323.23 Lot: 7

Contractor: Homeowner - Stephen J. Cannella

Contractor's Address: 224 Katie Lynn Court Brick, N.J.

Type of Construction (minor, new home): addition

Type of Debris (shingles, siding, wood, etc.): roof shingles, vinyl siding, wood shingles, lumber,
insulation, gutters (aluminum), vinyl soffit

Party responsible for removal: Homeowner - Stephen J. Cannella

Dumpster size: 30 yards

Destination of debris: Ocean County Landfill

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclable.

Generator's Certification: Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and that I have been authorized in writing, to make such declaration by the person in charge of the generator's operation.

Signature

Stephen J. Cannella

Print Name

September 15, 2003
Date

FOR ALL PERMITS AFFECTING A RESIDENTIAL STRUCTURE
(REGARDLESS IF A FIRE PERMIT IS REQUIRED) A MINIMUM OF 1 (ONE)
BATTERY OPERATED OR ELECTRIC SMOKE DETECTOR IS REQUIRED
ON EACH LEVEL AND IN THE VICINITY OF THE SLEEPING ROOMS. AS
OF APRIL 7, 2003 THE STATE OF NJ REQUIRES THE INSTALLATION OF
AT LEAST 1 (ONE) CARBON MONOXIDE DETECTOR IN THE VICINITY OF
ALL SLEEPING ROOMS. THIS APPLIES TO ALL DWELLING UNITS
CONTAINING A FUEL BURNING APPLIANCE OR ATTACHED GARAGE.

For work not requiring a fire inspection for fire alarms in accordance with the code,
homeowners or their agents (contractors) shall be required to confirm the
installation of these devices. This may be done by signing the below affidavit in lieu
of an inspection.

***** PLEASE READ AND SIGN *****

I hereby certify that a minimum of one smoke detector is installed and is operational on each level of this residential structure in the immediate
vicinity of the sleeping rooms. I further certify that a minimum of one carbon monoxide detector is installed and operational in the vicinity of the
sleeping rooms. Also, I understand that failure to install and maintain these devices in an operational condition is a violation of the New Jersey
Administrative Code 5:23 and may subject me to penalties as prescribed by law.

NAME: Stephen J. Cannella
SIGNATURE: [Signature] DATE: September 15, 2003
BLOCK: 323.23 LOT: 7 ADDRESS: 224 Katie Lynn Court - Brick

Kevin C. Sommons

Associates, Inc.
Structural Consultant
www.ksi-pe.com



ENGINEERING REPORT

October 1, 2003

Mr. Steve Canella
224 Katie Lynn Court
Brick, NJ

Re: Structural Review of Existing Footings

Dear Mr. ^{Canella}~~Nolan~~,

Pursuant to your request we performed a site visit to the above referenced property on Wednesday, September 17, 2003 to review the existing footings in order to determine the structural feasibility of adding a second story to the existing one story residence. It is our understanding the second story addition would be located above the garage area only. We were not provided with any plans at the site.

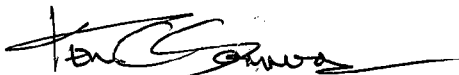
Based on the soil boring conducted by Mr. Jonas Endreson we have determined the existing soil is adequate to support an allowable load of 4000psf below a depth of three feet. The existing footings were found to be at a depth of 42inches below the existing grade.

The area of concern at the existing building is focused at the existing garage. The garage was found to have a concrete slab on grade supported by foundation walls which in turn were supported by a concrete footing. The footing at the garage was exposed for our review at the time of our visit and was found to be 10inches thick by 18inches wide. Again, the bottom of the footing was approximately 42inches below the existing grade. The footing was found to be in sound condition.

Based on our analysis we have determined the existing foundation is capable of supporting an additional second floor load. No modification of the existing footing is required to add a second floor. Also, please note that additional interior load points may require new support columns and new footings.

Our observations and recommendations are based on our visual review of the exposed areas of the footing, the soil boring and our experience reviewing this type of construction. We performed limited calculations concerning the existing footing only and offer no guarantee or warranty for any part of the existing building. If you have any questions or need clarification, please do not hesitate to contact us.

Sincerely,


Kevin C. Sommons, PE
Principal

pjs

CALCULATIONS

CLIENT: Steve Canella
PROJECT: Existing Foundation Review
Job No.: 0300-124

October 2, 2003
Designer: KCS

Design Task:

Design review of the existing foundations to support a new second floor.

LOADING SUMMARY:

SITE LOCATION: Brick, New Jersey

ANALYZE EXISTING FOOTING TO SUPPORT A TWO STORY STRUCTURE:

BASEMENT FOUNDATION REVIEW

Existing footing = 10" thick, 18" wide

Soil Design Parameters:

Active soil pressure = 60pcf

Allowable soil bearing pressure = 4000psf

Passive soil pressure = 200pcf

Soil Density = 120pcf

Footing Design Parameters

Concrete strength f'_c = 3000psi

Thickness = 10"

Width = 18"

Determine the allowable load to footing based on the physical parameters.

$P_{allow} = 4000\text{psf}(1.5') = 6000 \text{ plf}$ allowable load to footing.

Determine worse case load to footing with second floor addition:

Loading:

Roof Load = 22ft(25psf+15psf) = 880 plf

2nd Floor Load = 11ft(40psf+15psf) = 605 plf

1st Floor Load = concrete slab on grade.

Wall Load = 18ft(12psf) = 216 plf

Bsmnt Wall Load = 3ft(55psf) = 165 plf

TOTAL LOAD = 1866 plf

$P_{allow} = 6000 \text{ plf} > P_{actual} = 1866 \text{ plf}$ O.K.

Kevin C. Sommons

Associates, Inc.

Structural Consultant

www.ksi-pe.com



ENGINEERING REPORT

October 1, 2003

Mr. Steve Canella
224 Katie Lynn Court
Brick, NJ

Re: Structural Review of Existing Footings

Dear Mr. ^{Canella}~~Nolan~~,

Pursuant to your request we performed a site visit to the above referenced property on Wednesday, September 17, 2003 to review the existing footings in order to determine the structural feasibility of adding a second story to the existing one story residence. It is our understanding the second story addition would be located above the garage area only. We were not provided with any plans at the site.

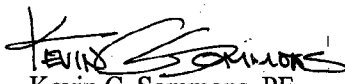
Based on the soil boring conducted by Mr. Jonas Endreson we have determined the existing soil is adequate to support an allowable load of 4000psf below a depth of three feet. The existing footings were found to be at a depth of 42inches below the existing grade.

The area of concern at the existing building is focused at the existing garage. The garage was found to have a concrete slab on grade supported by foundation walls which in turn were supported by a concrete footing. The footing at the garage was exposed for our review at the time of our visit and was found to be 10inches thick by 18inches wide. Again, the bottom of the footing was approximately 42inches below the existing grade. The footing was found to be in sound condition.

Based on our analysis we have determined the existing foundation is capable of supporting an additional second floor load. No modification of the existing footing is required to add a second floor. Also, please note that additional interior load points may require new support columns and new footings.

Our observations and recommendations are based on our visual review of the exposed areas of the footing, the soil boring and our experience reviewing this type of construction. We performed limited calculations concerning the existing footing only and offer no guarantee or warranty for any part of the existing building. If you have any questions or need clarification, please do not hesitate to contact us.

Sincerely,


Kevin C. Sommons, PE
Principal

pjs

CALCULATIONS

CLIENT: Steve Canella
PROJECT: Existing Foundation Review
Job No.: 0300-124

October 2, 2003
Designer: KCS

Design Task:

Design review of the existing foundations to support a new second floor.

LOADING SUMMARY:

SITE LOCATION: Brick, New Jersey

ANALYZE EXISTING FOOTING TO SUPPORT A TWO STORY STRUCTURE:

BASEMENT FOUNDATION REVIEW

Existing footing = 10" thick, 18" wide

Soil Design Parameters:

Active soil pressure = 60pcf

Allowable soil bearing pressure = 4000psf

Passive soil pressure = 200pcf

Soil Density = 120pcf

Footing Design Parameters

Concrete strength f'_c = 3000psi

Thickness = 10"

Width = 18"

Determine the allowable load to footing based on the physical parameters.

$$P_{\text{allow}} = 4000\text{psf}(1.5') = 6000 \text{ plf allowable load to footing.}$$

Determine worse case load to footing with second floor addition:

Loading:

Roof Load = 22ft(25psf+15psf) = 880 plf

2nd Floor Load = 11ft(40psf+15psf) = 605 plf

1st Floor Load = concrete slab on grade.

Wall Load = 18ft(12psf) = 216 plf

Bsmnt Wall Load = 3ft(55psf) = 165 plf

TOTAL LOAD = 1866 plf

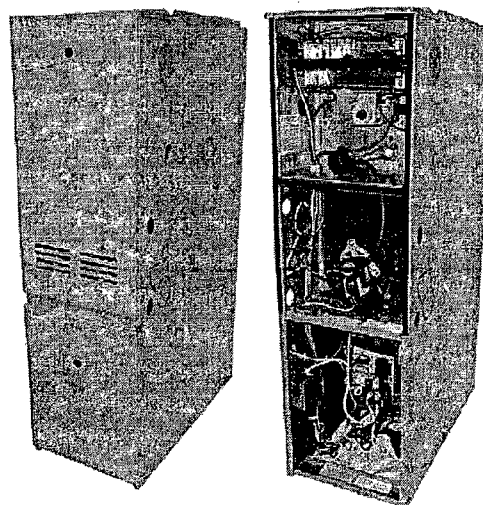
$P_{\text{allow}} = 6000 \text{ plf} > P_{\text{actual}} = 1866 \text{ plf O.K.}$



Goodman Tech
1-713-861-2500

92.6% AFUE MULTI-POSITION CONDENSING GAS FURNACE

GMNT SERIES



Description/Application

- All model design certified by ITS to be in compliance with ANSI Z21.47 and CAN/CGA 2.3 (Canada) safety standards
- Completely assembled, factory run-tested furnace for heating or combination heating/cooling application
- For utility room, closet, alcove, basement or attic application
- Vertical or horizontal venting with 2" PVC for 40k and 60k; 3" PVC for 80k, 100k and 120k
- Capable of multi-position installation – upflow, downflow or horizontal
- For direct vent (2 pipe) or non-direct vent (1 pipe) installations

Construction

- Heavy-gauge, reinforced, wrap-around insulated steel cabinet with durable baked enamel finish
- Tubular heat exchanger (primary)
- Bottom or side air inlet
- Aluminized-steel inshot burners
- Convenient left- or right-hand connection for gas, electric service, combustion air and vent
- Removable solid bottom block-off

Standard Equipment

- Energy-saving PSC, multi-speed, direct drive blower motors
- Quiet operating, sound isolated blower assembly
- 40VA transformer for heating and air conditioning control service
- Combination redundant gas valve and regulator
- Integrated furnace control with diagnostics
- Blower door safety switch
- Energy saving Hot Surface Ignition system
- Multiple-flame roll-out switches
- Outlet air limit switch
- Pressure switch for proof of air
- Complies with California NOX Standards
- Completely insulated cabinet
- Corrosion resistant 29-4C secondary heat exchanger that extracts energy from the gas and converts it to usable heat
- Quiet, corrosion-resistant, plastic-induced blower assembly
- Drain kit contains vent screens, drain trap, hoses and clamps

Optional Equipment

- L. P. Conversion Kit (LPT-01)
- Concentric Vent Kit (CVK-00)

As an Energy Star Partner, Goodman Mfg. Co., L.P., has determined that this product meets the Energy Star guidelines for energy efficiency. Information contained herein is subject to change without notice.

SS-312D

Made in the USA by:
Goodman Manufacturing Company, L.P.
2550 North Loop West, Suite 400 ~ Houston, Texas 77092
www.goodmanmfg.com

GMNT Series 05/03

PERFORMANCE RATINGS

Model	Natural Gas Input BTUH	Natural Gas Output BTUH	Propane Gas Input BTUH	Propane Gas Output BTUH	DOE AFUE	Temperature Rise (°F)
GMNT040-3B	40,000	37,000	37,000	34,000	92.6	25 – 55
GMNT060-3B	60,000	55,000	55,000	51,000	92.6	35 – 65
GMNT080-4B	80,000	73,500	73,000	73,000	92.6	35 – 65
GMNT100-4B	100,000	92,000	92,000	85,000	92.6	40 – 70
GMNT120-5B	120,000	110,000	111,000	102,000	92.6	40 – 70

BEFORE PURCHASING THIS APPLIANCE, READ IMPORTANT ENERGY COST AND EFFICIENCY DATA AVAILABLE FROM YOUR RETAILER.

SPECIFICATION DATA

Model	Circulator Blower			Vent Diameter (in.)	Filter Size (in.)		Minimum Circuit Ampacity (amps)	Maximum Overcurrent Protection (amps)	Shipping Weight (lbs.)
	Size (D x W)	HP	Speeds		Perm.	Disp.			
GMNT040-3B	10" x 6"	1/3	4	2	290	580	8.1	15	170
GMNT060-3B	10" x 6"	1/3	4	2	290	580	8.1	15	180
GMNT080-4B	10" x 8"	1/2	4	3	385	770	12.5	15	205
GMNT100-4B	10" x 10"	1/2	4	3	385	770	12.5	15	225
GMNT120-5B	11" x 10"	3/4	3	3	480	960	11.8	15	265

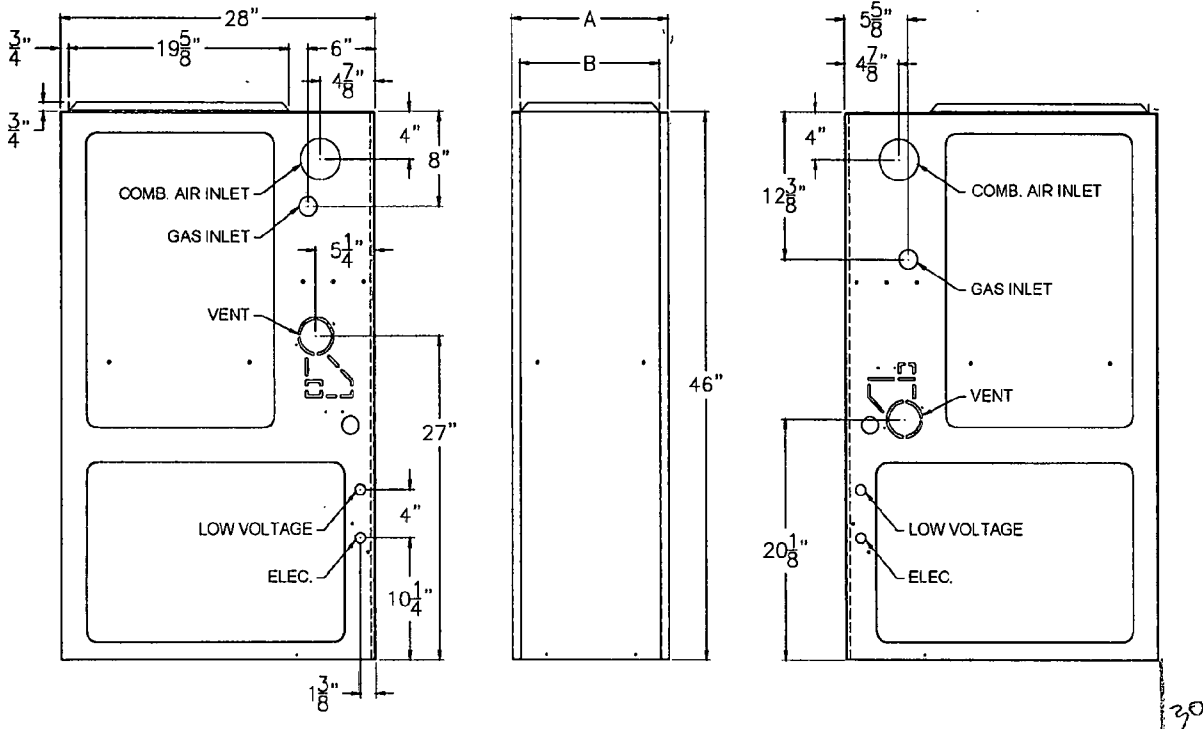
1) Vent and combustion air diameters may vary depending on vent length. Refer to furnace installation instructions.

2) Minimum Circuit Ampacity = (1.25 x Circulator Blower Amps) + ID Blower amps.

3) Maximum Overcurrent Protection refers to maximum recommended fuse or circuit breaker size.

NOTES:

- All furnaces are manufactured for use on 115 VAC, 60 Hz, single-phase electrical supply.
- Gas Service Connection 1/2" FPT.
- IMPORTANT:** It is required to size fuses and wires properly and make electrical connections in accordance with the National Electrical Code and/or all existing local codes.



Model	A	B	Combustible Floor Base
GMNT040-3	14"	12 1/2"	SBM14
GMNT060-3	14"	12 1/2"	SBM14
GMNT080-4	17 1/2"	16"	SBM17
GMNT100-4	21"	19 1/2"	SBM21
GMNT120-5	24 1/2"	23"	SBM24

CLEARANCES FROM COMBUSTIBLE MATERIALS

Sides	Rear	Front*	Vent	Top
1"	0"	3"	0"	1"

Approved for line contact in the horizontal position.

*36" clearance for serviceability recommended.

CASED (U) COIL APPLICATION OPTIONS

Coil Model Number	Furnace Model Number	GMNT040-3 GMNT060-3	GMNT080-4	GMNT100-4	GMNT120-5
	Furnace Width	14"	17½"	21"	24½"
	Coil Width				
U-18	14"	X			
U-29	14"	X			
U-30	17½"	X ⁽¹⁾	X ⁽²⁾		
U-31	14"	X			
U-32	17½"	X ⁽¹⁾	X ⁽²⁾		
U-35	14"	X			
U-36	17½"	X ⁽¹⁾	X ⁽²⁾		
U-42	17½"	X ⁽¹⁾	X ⁽²⁾		
U-47	17½"		X ⁽³⁾		
U-49	21"		X ⁽¹⁾	X ⁽²⁾	
U-59	21"		X ⁽¹⁾	X ⁽²⁾	
U-60	24½"			X ⁽¹⁾	X ⁽²⁾
U-61	24½"			X ⁽¹⁾	X ⁽²⁾
U-62	21"		X ⁽¹⁾	X ⁽²⁾	

(1) Using the factory installed bottom cabinet filler plates

(2) Discard bottom cabinet filler plates

(3) (4)

Due to the rating mix/match of various coils with outdoor units, it is important to match the furnace airflow for the total system capacity. Refer to furnace, heat pump and/or condensing unit specification sheets.

BLOWER PERFORMANCE SPECIFICATIONS

(CFM & Temperature Rise vs. External Static Pressure)																
Model Heating Speed as Shipped	Motor Speed	Tons AC @ 0.5" ESP	External Static Pressure, (Inches Water Column)													
			0.1		0.2		0.3		0.4		0.5		0.6	0.7	0.8	
			CFM	Rise	CFM	Rise	CFM	Rise	CFM	Rise	CFM	Rise	CFM	CFM	CFM	
GMNT040-3B (MED-LO)	HIGH	3.0	1395	-----	1340	25	1282	27	1227	28	1163	29	1096	1015	940	
	MED	2.5	1132	30	1103	31	1089	31	1048	33	1005	34	954	897	817	
	MED-LO	2.0	905	38	913	37	897	38	880	39	854	40	814	762	701	
	LOW	1.5	718	47	702	49	693	49	668	51	640	53	617	576	526	
GMNT060-3B (MED)	HIGH	3.0	1352	37	1293	39	1239	41	1185	43	1126	45	1062	980	907	
	MED	2.5	1084	47	1081	47	1054	48	1016	50	971	52	921	867	796	
	MED-LO	2.0	894	57	860	59	867	58	847	60	807	63	777	734	688	
	LOW	1.5	680	-----	666	-----	658	-----	635	-----	607	-----	575	548	502	
GMNT080-4B (MED-LO)	HIGH	4.0	1911	35	1823	37	1747	39	1638	41	1546	44	1464	1355	1264	
	MED	3.5	1686	40	1623	42	1531	44	1473	46	1412	48	1342	1247	1160	
	MED-LO	3.0	1419	48	1385	49	1350	50	1306	52	1230	55	1197	1131	1040	
	LOW	2.5	1153	59	1147	59	1126	60	1099	62	1069	63	1015	957	879	
GMNT100-4B (MED)	HIGH	4.0	2222	38	2146	40	2035	42	1954	43	1810	47	1671	1533	1422	
	MED	3.5	1734	49	1717	49	1672	51	1618	52	1547	55	1463	1354	1257	
	MED-LO	3.0	1426	59	1405	60	1407	60	1357	62	1327	64	1266	1203	1120	
	LOW	2.5	1231	69	1186	-----	1130	-----	1087	-----	1029	-----	945	870	787	
GMNT120-5B (MED)	HIGH	5.0	2207	46	2153	47	2104	48	2043	50	1980	51	1915	1848	1760	
	MED	4.0	1630	62	1590	64	1550	65	1509	67	1466	69	1423	1354	1282	
	LOW	3.5	1185	-----	1152	-----	1117	-----	1073	-----	1017	-----	968	905	826	

- CFM in chart is without filter(s). Filters do not ship with this furnace, but they must be provided by the installer. If the furnace requires two return filters, this chart assumes both filters are installed.
- All furnaces ship as high-speed cooling. Installer must adjust the blower cooling speed as needed.
- For most jobs, about 400 CFM per ton when cooling is desirable.
- INSTALLATION IS TO BE ADJUSTED TO OBTAIN TEMPERATURE RISE WITHIN THE RANGE SPECIFIED ON THE RATING PLATE.
- The chart is for information only. For satisfactory operation, external static pressure must not exceed value shown on the rating plate. The shaded area indicates ranges in excess of maximum static pressure allowed when heating.
- The dashed (---) areas indicate a temperature rise not recommended for this model.
- The above chart is for U.S. furnaces installed at 0-2000 feet. At higher altitudes, a properly de-rated unit will have approximately the same temperature rise at a particular CFM, while ESP at the CFM will be lower.

NOTE: SPECIFICATIONS AND PERFORMANCE DATA LISTED HEREIN ARE SUBJECT TO CHANGE WITHOUT NOTICE

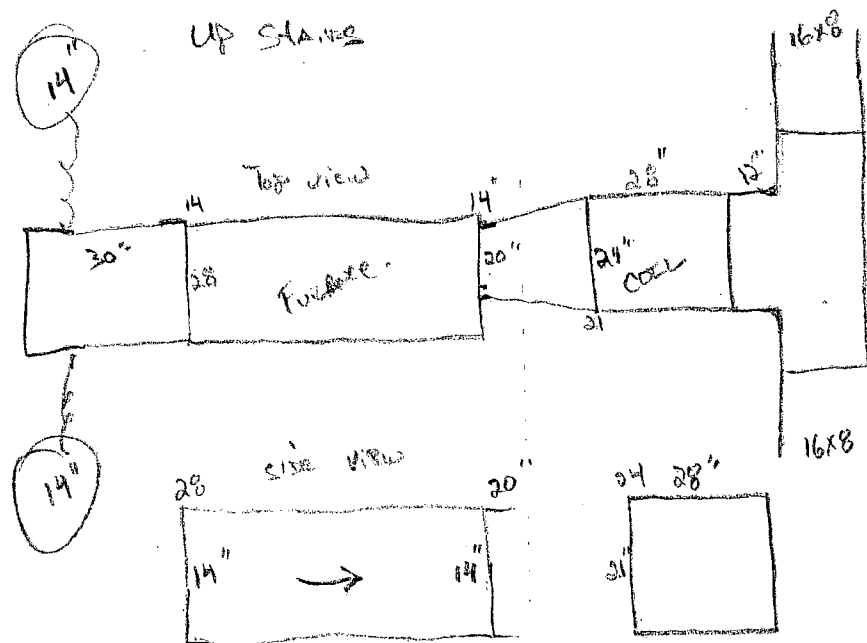
Quality Makes the Difference!

All of our systems are designed and manufactured with the same high-quality standards, regardless of size or efficiency. We have designed these units to significantly reduce the most frequent causes of product failure. They are simple to service and forgiving to operate. We use quality materials and components. Finally, every unit is run-tested before it leaves the factory. That's why we know...

There's No Better Quality.

Visit our web site at www.goodmanmfg.com for information on:

- Goodman products
- Warranties
- Customer Services
- Parts
- Contractor Programs and Training
- Financing Options





Air Conditioning & Heating



HORIZONTAL TWO WAY BUTT-UP EVAPORATOR COIL

Description / Application

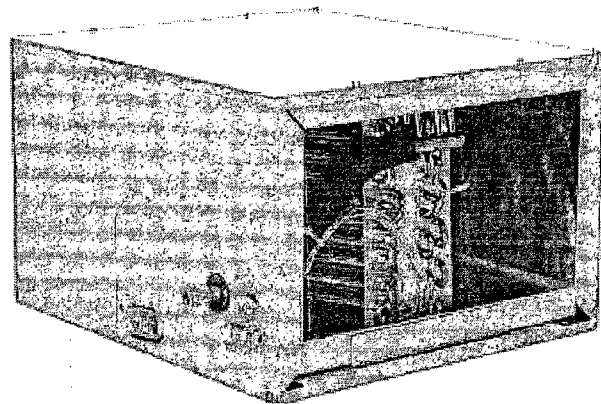
- Compact Horizontal Design for Attic or Crawl Space Applications
- No transition required

Cabinet Construction

- Painted
- Insulated Cabinet
- Services Access – Top & Sides
- Split Access Doors
- External Flowrator

Standard Equipment

- Copper Tube Aluminum Fin Coil
- No rust Plastic Drain Pan
- Primary and Secondary Drain Connections
- Check Flowrator for Heat Pump or Cooling Unit Operation



Quality Makes the Difference!

All of our systems are designed and manufactured with the same high quality standards regardless of size or efficiency. Our designs virtually eliminate the most frequent causes of product failure. They are simple to service and forgiving to operate. We use the highest quality materials and components available because if a part fails then the unit fails. Finally, every unit is run tested before it leaves the factory. That's why we know.....

There's No Better Quality.

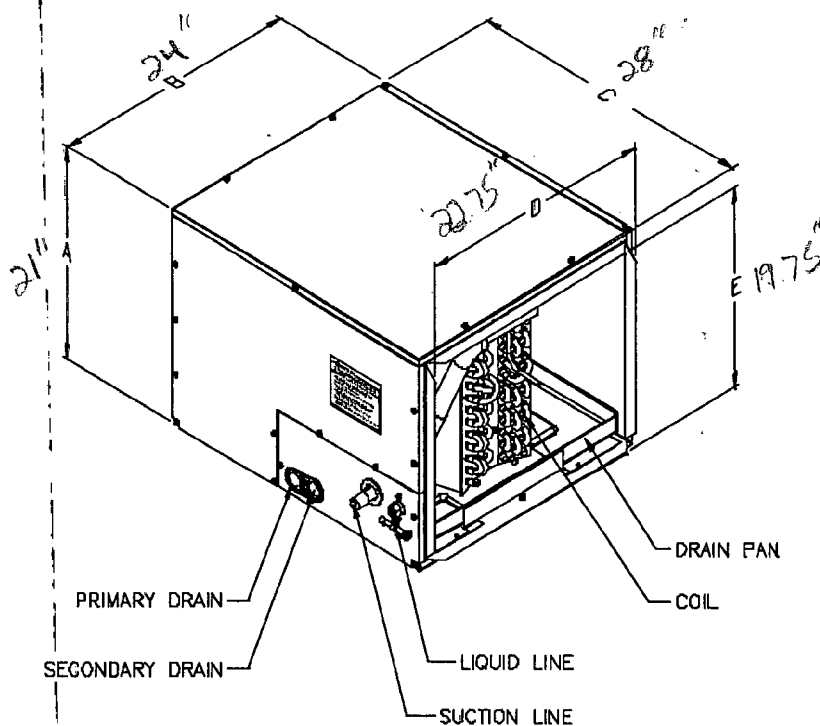
Visit our web site at www.goodmanmfg.com for information on:

- Goodman Manufacturing products
- Warranties
- Customer Services
- Parts
- Contractor Programs and Training
- Financing Options

SS-306D

Made in the USA by:
Goodman Manufacturing Company, L.P.
2550 North Loop West, Suite 400 - Houston, Texas 77092
www.goodmanmfg.com

HT SERIES 02/02



DIMENSIONS:

CABINET SIZE	HT COIL MODEL	A		B		C		D		E	
		IN	MM	IN	MM	IN	MM	IN	MM	IN	MM
SMALL	HT-1830	14.00	355.6	21.125	536.57	24.436	620.66	19.875	504.82	12.75	323.85
	HT-3236	14.00	355.6	21.125	536.57	24.436	620.66	19.875	504.82	12.75	323.85
MEDIUM	HT-36	17.50	444.5	21.125	536.57	24.436	620.66	19.875	504.82	16.25	412.75
	HT-4248	17.50	444.5	21.125	536.57	24.436	620.66	19.875	504.82	16.25	412.75
LARGE	HT-4860	21.00	533.4	24.00	609.6	27.882	708.20	22.75	577.85	19.75	501.65
	HT-61	21.00	533.4	24.00	609.6	27.882	708.20	22.75	577.85	19.75	501.65

- All air opening flanges are 0.625" (15.62mm)

SPECIFICATIONS:

MODEL	HT-1830	HT-3236	HT-36	HT-4248	HT-4860	HT-61
EVAPORATOR COIL						
FACE AREA (Sqft/Sqm.)	3.33 (.309)	3.33 (.309)	4.44 (.412)	4.44 (.412)	6.11 (.568)	6.11 (.568)
ROWS	2	3	2	3	3	4
FIN PER INCH	14	14	14	14	14	14
DRAINS CONNECTION						
PRIMARY AUXILLIARY (in/mm)	3/4" (19.05)	3/4" (19.05)	3/4" (19.05)	3/4" (19.05)	3/4" (19.05)	3/4" (19.05)
REFRIGERATION LINE CONNECTION						
VAPOR (in/mm)	3/4" (19.05)	3/4" (19.05)	3/4" (19.05)	3/4" (19.05)	7/8" (22.225)	7/8" (22.225)
LIQUID (in/mm)	3/8" (9.525)	3/8" (9.525)	3/8" (9.525)	3/8" (9.525)	3/8" (9.525)	3/8" (9.525)
SHIPPING WEIGHT (Lbs/Kg)	40 (18.143)	45 (20.412)	50 (22.680)	55 (24.948)	65 (29.484)	70 (31.751)

- Refer to Outdoor unit "IO" for proper refrigeration line sizes. Installer may need to supply adapter.

HT AIR FLOW DATA: - STATIC PRESSURE DROP ACROSS COIL. HORIZONTAL RIGHT APPLICATIONS.

COIL MODEL		AIR QUANTITY (CFM) VS. PRESSURE DROP (IN.WC)				
HT-1830		975	1075	1175	1250	1350
	WET	0.14	0.17	0.21	0.26	0.31
	DRY	0.08	0.11	0.15	0.21	0.26
HT-3236		950	1050	1150	1250	1350
	WET	0.14	0.17	0.22	0.27	0.32
	DRY	0.08	0.11	0.15	0.20	0.25
HT-36		1175	1275	1375	1450	1550
	WET	0.14	0.17	0.21	0.25	0.31
	DRY	0.09	0.11	0.15	0.21	0.26
HT-4248		1150	1250	1350	1450	1550
	WET	0.14	0.17	0.21	0.26	0.32
	DRY	0.10	0.12	0.16	0.21	0.27
HT-4860		1750	1850	1950	2050	2150
	WET	0.21	0.26	0.31	0.37	0.44
	DRY	0.18	0.20	0.26	0.32	0.38
HT-61		1750	1850	1950	2050	2150
	WET	0.22	0.27	0.32	0.38	0.45
	DRY	0.19	0.21	0.27	0.33	0.39

NOTE: For Horizontal Left Applications, Reduce Airflow 3%

* Nominal CFM

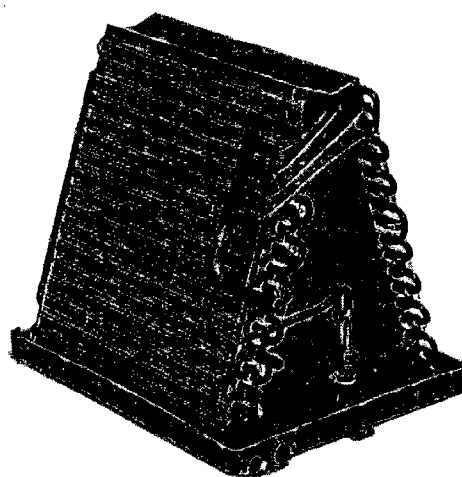
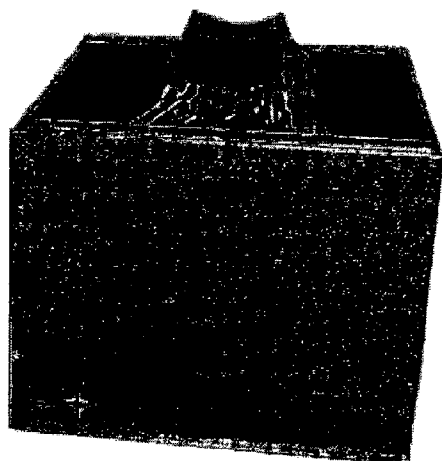
CASE COIL / FURNACE APPLICATION OPTION:

HT COIL	CABINET SIZE (IN/MM)	14" FURNACE GMP050-3 GMP075-3 GMPN040-3 GMPN060-3 GMT045-3 GMT070-3	17" FURNACE GMP100-3 GMPE075-3 GMT090-3	17" FURNACE GMP075-4 GMP100-4 GMPN080-4 GMT070-4 GMT090-4	21" FURNACE GMP125-4 GMPN100-4 GMPE100-4 GMT090-5	21" FURNACE GMP100-5 GMP125-5 GMPE125-5 GMT115-5
HT-1830	14 (355.6)	X	-	-	-	-
HT-3236	14 (355.6)	X	X	-	-	-
HT-36	17.5 (444.5)	X	X	X	X	-
HT-4248	17.5 (444.5)	-	X	X	X	X
HT-4860	21 (533.4)	-	-	X	X	X
HT-61	21 (533.4)	-	-	X	X	X

Due to the rating mix/match of various coils with outdoor units it is important to match the furnace air flow for the total system capacity. Refer to Furnace Specification sheets for air flow charts.

- INFORMATION SUBJECT TO CHANGE WITHOUT NOTICE.

CASED & UNCASED UPFLOW & DOWNFLOW EVAPORATOR COILS



Description / Application

- Compact, versatile, right or left horizontal position
- May be used in closet, utility room, or basement

Construction

- Insulated steel cabinet

Cabinet Finish

- No rust galvanized stucco finish

Standard Finish

- Fully insulated cabinet on cased coils
- Equipped with a check flowrator for heat pump and cooling unit operation
- No rust high temperature thermoplastic drain pans for upflow and downflow application with secondary drain

Accessories

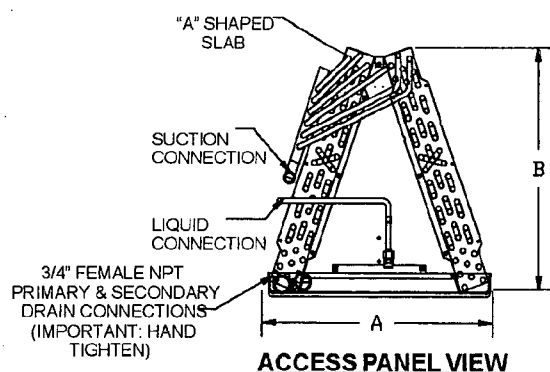
- Downflow kit (DFK) used for all multi-position furnaces for downflow applications

SS-208D
Rev. M

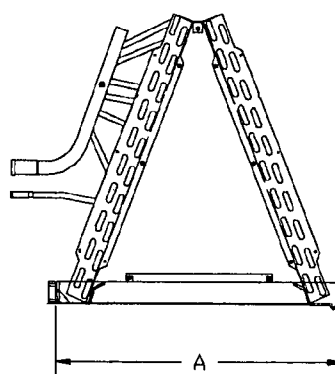
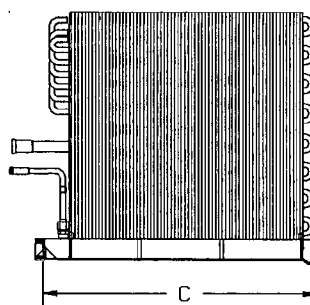
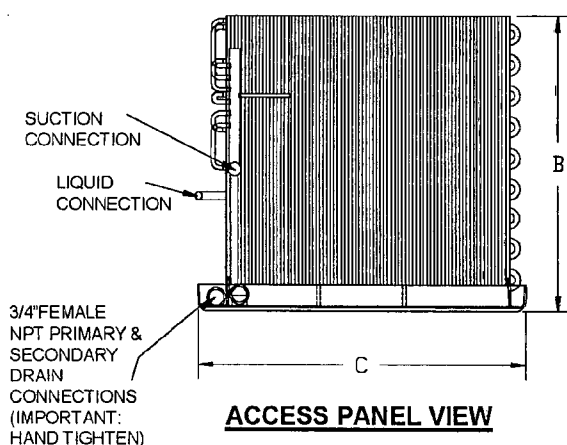
Made in the USA by:
Goodman Manufacturing Company, L.P.
2550 North Loop West, Suite 400
Houston, TX 77092
www.goodmanmfg.com

U/UC SERIES 02/03

UNCASED UPFLOW EVAPORATOR COILS **UC-18 THRU UC-42, UC-47, UC-49, UC-59, & UC-62**



UC-60 & UC-61

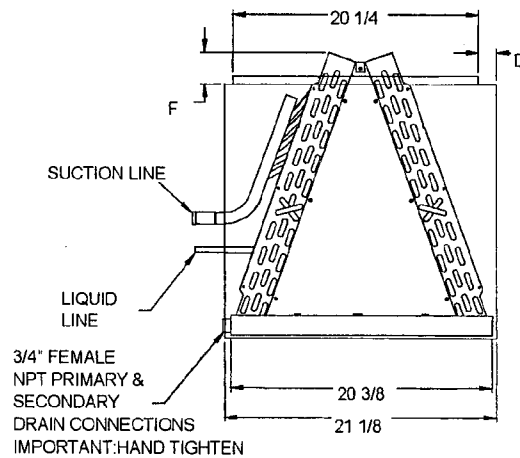
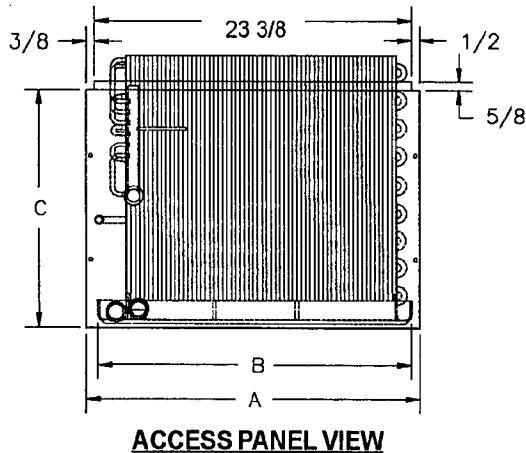
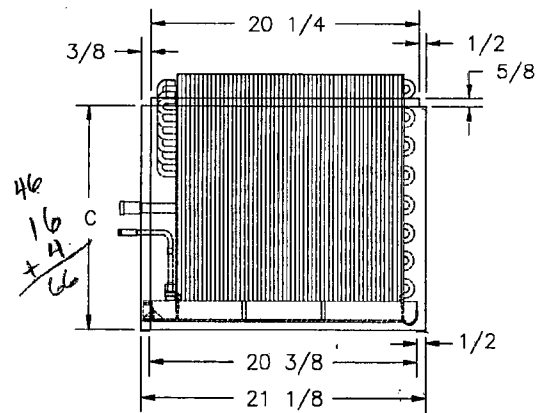
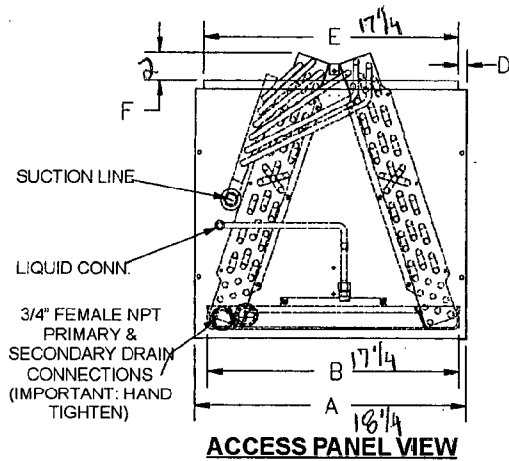


DIMENSIONS (INCHES)						SPECIFICATIONS				
COIL MODEL	NOMINAL TONS	A	B	C	NOMINAL CFM	STATIC PRESSURE WET COIL	NO. ROWS	LIQUID CONN.	SUCTION CONN.	SHIP WT.
UC-18	1 1/2	13	14 1/4	20 1/8	650	0.20	2	3/8	5/8	14
UC-29	*2 - 21/2	13	14	20 1/8	900	0.20	2	3/8	3/4	16
* UC-32	2 1/2	13	17 7/8	20 1/8	1000	0.30	3	3/8	3/4	24
UC-35	3	13	18 1/4	20 1/8	1200	0.30	2	3/8	3/4	18
UC-36	3	17	17 1/2	20 1/8	1200	0.25	2	3/8	3/4	19
UC-42	3 1/2	17	17 3/4	20 1/8	1400	0.30	3	3/8	3/4	34
UC-47	4	17	22 1/8	20 1/8	1600	0.30	3	3/8	7/8	31
UC-49	4	19 3/4	21 7/8	20 1/8	1600	0.30	3	3/8	7/8	33
UC-59	5	19 3/4	25 7/8	20 1/8	2000	0.30	3	3/8	7/8	36
UC-60	5	20 1/4	21 1/4	23	2000	0.30	3	3/8	7/8	42
UC-61	5	20 1/4	22	23	2000	0.30	4	3/8	7/8	44
UC-62	5	19 3/4	26 1/8	20 1/8	2000	0.30	4	3/8	7/8	47

NOTES:

- SEE BACK SHEET FOR INSTALLATION TIPS.
- DO NOT USE THIS COIL ON OIL FURNACES OR ANY APPLICATIONS WHERE THE TEMPERATURE ON DRAIN PAN MAY EXCEED 300°F. USE THE FOLLOWING METAL DRAIN PANS: 15236-18 (U-18 THRU U-32), 15236-19 (U-36 THRU U-47), 15236-20 (U/UC-60 THRU U-61), AND FIELD FABRICATED METAL PAN FOR (U/UC-49, U/UC-59, AND U/UC-62).
- * UC-29 COMES WITH 2 TON FLOWRATER B13134-59. IF 2-1/2 TON MATCHING IS REQUIRED, INSTALL PROVIDED PISTON KIT B17898-65.

CASED UPFLOW EVAPORATOR COILS U-18 THRU U-42, U-47, U-49, U-59, & U-62



DIMENSIONS (INCHES)								SPECIFICATIONS					
COIL MODEL	NOMINAL TONS	A	B	C	D	E	F	NOMINAL CFM	STATIC PRESSURE WET COIL	NO. ROWS	LIQUID CONN.	SUCTION CONN.	SHIP WT.
U-18	1 1/2	14 1/4	12 3/4	14	1/2	13 1/4	-	650	0.20	2	3/8	5/8	24
U-29	*2 - 21/2	14 1/4	12 3/4	14	1/2	13 1/4	-	900	0.20	2	3/8	3/4	26
U-30	2 1/2	18 1/4	17 1/4	16	1/2	17 1/4	-	1000	0.30	2	3/8	3/4	33
U-31	2 1/2	14 1/4	12 3/4	14	1/2	13 1/4	-	1000	0.30	3	3/8	3/4	30
U-32	2 1/2	18 1/4	17 1/4	16	1/2	17 1/4	2	1000	0.25	3	3/8	3/4	41
U-35	3	14 1/4	12 1/4	14	1/2	13 1/4	4 1/8	1200	0.30	2	3/8	3/4	29
U-36	3	18 1/4	17 1/4	16	1/2	17 1/4	1 3/4	1200	0.30	2	3/8	3/4	40
U-42	3 1/2	18 1/4	17 1/4	16	1/2	17 1/4	2	1400	0.30	3	3/8	3/4	48
U-47	4	18 1/4	17 1/4	16	1/2	17 1/4	6	1600	0.30	3	3/8	7/8	50
U-49	4	21 1/8	20 1/8	27	1/2	20	-	1600	0.30	3	3/8	7/8	51
U-59	5	21 1/8	20 1/8	27	1/2	20	-	2000	0.30	3	3/8	7/8	54
U-60	5	24 1/4	23 1/8	20 1/2	1/2	20 1/8	1	2000	0.30	3	3/8	7/8	60
U-61	5	24 1/4	23 1/8	20 1/2	1/2	20 1/8	1 5/8	2000	0.30	4	3/8	7/8	62
U-62	5	21 1/8	20 1/8	27	1/2	20	-	2000	0.30	4	3/8	7/8	68

NOTE: FOR DRAIN PAN SPECIFICATIONS, REFER TO NOTE 2 ON PAGE 2.

1) * U-29 COMES WITH 2 TON FLOWRATOR B13134-59. IF 2 1/2 MATCHING IS REQUIRED, INSTALL PROVIDED PISTON KIT B17898-65.

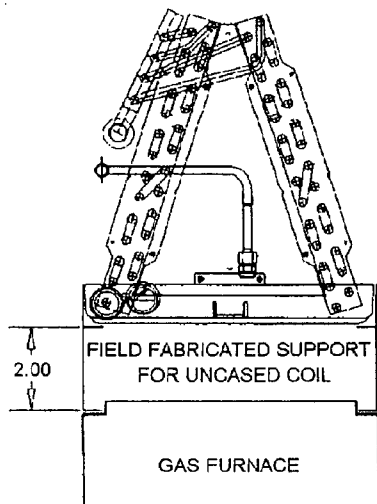
STATIC PRESSURE DROP ACROSS COIL

Air Flow Data - Static Pressure Drop Across Coil - Upflow Application

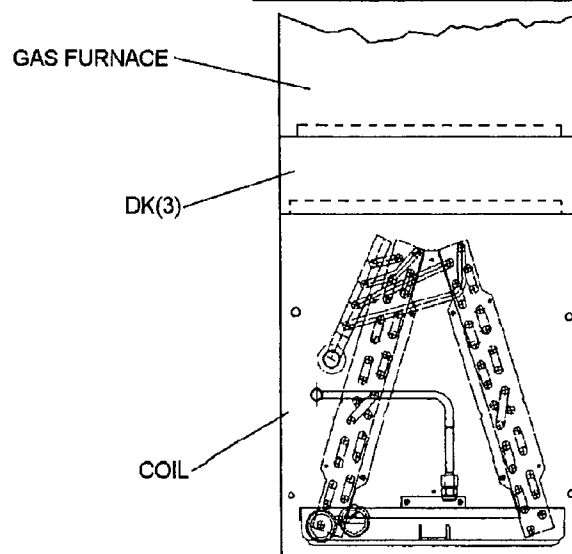
COIL MODEL		AIR QUANTITY (CFM)							
U18/UC18	CFM	400	500	600	700	800	900.00	1000	1100
	WET	0.10	0.12	0.18	0.25	—	—	—	—
	DRY	0.08	0.10	0.12	0.19	—	—	—	—
U29/UC29 /30	CFM	600	700	800	900	1000	1100	1200	1300
	WET	0.12	0.16	0.20	0.25	0.30	—	—	—
	DRY	0.08	0.10	0.13	0.16	0.21	—	—	—
U32/UC32 U31	CFM	700	800	900	1000	1100	1200	1300	1400
	WET	0.16	0.22	0.24	0.28	0.34	—	—	—
	DRY	0.10	0.16	0.18	0.24	0.27	—	—	—
U36/UC36 U35/UC35	CFM	800	900	1000	1100	1200	1300	1400	1500
	WET	0.13	0.16	0.20	0.24	0.28	0.30	—	—
	DRY	0.10	0.12	0.14	0.18	0.24	0.28	—	—
U42/UC42 U47/UC47	CFM	900	1000	1100	1200	1300	1400	1500	1600
	WET	0.12	0.16	0.20	0.24	0.27	0.30	0.34	—
	DRY	0.10	0.13	0.15	0.18	0.20	0.22	0.26	—
U49/UC49	CFM	1200	1300	1400	1500	1600	1700	1800	1900
	WET	0.14	0.18	0.22	0.26	0.30	0.34	—	—
	DRY	0.12	0.14	0.17	0.19	0.22	0.26	—	—
U59/UC59 U60/UC60	CFM	1600	1700	1800	1900	2000	2100	2200	2300
	WET	0.17	0.21	0.24	0.27	0.30	0.33	0.36	0.40
	DRY	0.13	0.14	0.19	0.22	0.25	0.29	0.32	0.36
U61/UC61 U62/UC62	CFM	1600	1700	1800	1900	2000	2100	2200	2300
	WET	0.19	0.22	0.26	0.29	0.32	0.36	0.40	0.45
	DRY	0.15	0.17	0.21	0.25	0.28	0.32	0.35	0.39

UC COIL INSTALLATION RECOMMENDATIONS

MINIMUM DISTANCE
BETWEEN FURNACE AND COIL PAN = 2"



DOWNFLOW APPLICATIONS



NOTE:

- Do not use this coil on oil furnaces or any applications where the temperature on drain pan may exceed 300°F. Use the following metal drain pans: 15236-18 (U-18 thru U-32), 15236-19 (U-36 thru U-47), and 15236-20 (U/UC-60 thru U-61).
- Due to the rating mix/match of various coils with outdoor units it is important to match the furnace air flow for the total system capacity. (Refer to furnace spec. sheet & condenser/heat pump spec. sheet.)

CASED (U) COIL APPLICATION OPTIONS

FURNACE MODEL NO.	GMP050-3 GMP050-32(C) GMP075-3 GMP075-32(C) GMPH050-3 GMPN040-3 GMPN080-3 GMT045-3 (ND) GMT070-3 (ND) GMTH045-3 (ND) GSM060-3 (ND) GSMS080-3 (ND) GSU060-3 (*)	GDT045-3 GDT070-3 GMNT040-3 <u>GMNT060-3</u> GPD050-3 GPD075-3	GMP075-3 GMP100-3 GMP100-4 GMP100-42(C) GMPE075-3 GMPH075-4 GMPN080-4 GMT070-4 (ND) GMT090-3 (ND) GMT090-4 (ND) GMTH070-4 (ND) GSM080-4 (ND) GSMS080-4 (ND) GSU080-4 (*)	GDT090-4 GMNT080-4 GPD100-4	GMP100-5 GMP125-4 GMP125-5 GMP125-52(C) GMPE100-4 GMPE125-5 GMPH080-5 GMPN100-4 GMT090-5 (ND) GMT115-5 (ND) GMTH115-5 (ND) GSM100-4 (ND) GSMS100-4 (ND) GSU100-4 (*)	GDT115-5 GMNT100-4 GPD125-4	GMP150-5 GMP150-52(C) GMPH120-5 GMPN120-5 GMT140-5 (ND)	GMNT120-5
NOMINAL FURNACE WIDTH	14"	14"	17 1/2"	17 1/2"	21"	21"	24 1/2"	24 1/2"
DFK MODEL NO. (3)	DFK - 14	<u>DFKT-14</u>	DFK - 17	DFKT-17	DFK - 21	DFKT - 21	DFK - 24	DFKT - 24
COIL MODEL NO.	NOMINAL COIL WIDTH							
U-18	14"	X	X					
U-29	14"	X	X					
U-30	17 1/2"	X(1)	X(1)	X(2)	X(2)			
U-31	14"	X	X					
U-32	17 1/2"	X(1)	X(1)	X(2)	X(2)			
U-35	14"	X	X					
U-36	17 1/2"	X(1)	X(1)	X(2)	X(2)			
U-42	17 1/2"	X(1)	X(1)	X(2)	X(2)			
U-47	17 1/2"			X	X			
U-49	21"			X(1)	X(1)	X(2)	X(2)	
U-59	21"			X(1)	X(1)	X(2)	X(2)	
U-60	24 1/2"					X(1)	X(1)	X(2)
U-61	24 1/2"					X(1)	X(1)	X(2)
U-62	21"			X(1)	X(1)	X(2)	X(2)	

- (1) Utilizing factory installed bottom cabinet filler plates.
 (2) Discard bottom cabinet filler plates
 (3) Downflow Coil Adapter Kit allows use of U coils in downflow applications.
 (*) Upflow Application only
 (ND) Not for Downflow

NOTE: SPECIFICATIONS AND PERFORMANCE DATA LISTED HEREIN ARE SUBJECT TO CHANGE WITHOUT NOTICE

Quality Makes the Difference!

All of our systems are designed and manufactured with the same high quality standards regardless of size of efficiency. Our designs virtually eliminate the most frequent causes of product failure. They are simple to service and forgiving to operate. We use the highest quality materials and components available because if a part fails then the unit fails. Finally, every unit is run tested before it leaves the factory. That's why we know...

There's No Better Quality.

Visit our website at www.goodmanmfg.com for information on:

- Goodman Products
- Warranties
- Customer Services
- Parts
- Contractor Programs and Training
- Financing Options



13 SEER HIGH EFFICIENCY SPLIT SYSTEM AIR CONDITIONING 2 THRU 5 TON [7.00 to 17.56kw]



\$400.00 second through fifth year compressor labor allowance is available. Ask your dealer for details!

Description / Application

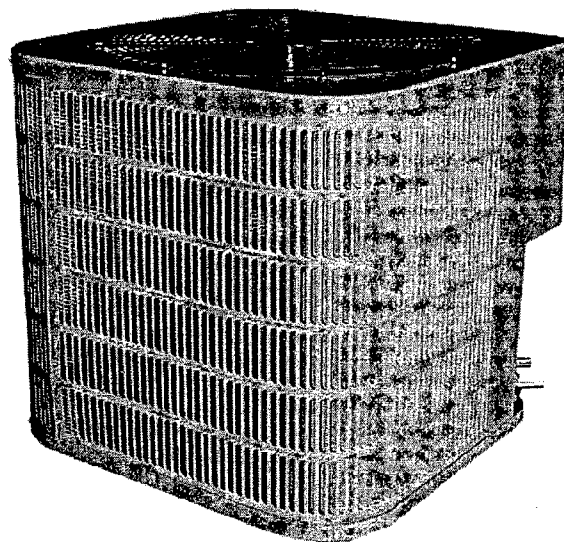
- CLT outdoor condensing section designed for ground level or rooftop mounting application.

Designed to be matched with:

- AR & AER indoor section is a versatile up, horizontal, or counterflow air handler. These units may be located in closet, utility room, attic or basement
- AW & AWB vertical wall mounted air handler is designed for installation with a water heater or recessed in a wall.
- U, UC, H, HT fan-less indoor coils designed to fit our furnace units for add on heat pump or cooling applications.
- AC, Ceiling Mounted Air Handler.

Accessories

- Standard room thermostat with 1-stage cool – 1-stage heat, Model CHT18-60.
- Digital room thermostat with 1-stage cool – 1-stage heat, Model CHTD18-60.
- Outdoor thermostats for stage – multi-stage indoor heating units, OT18-60.



Standard Equipment Features

- Attractive two-piece louvered guard protects coil from damage and strengthens the unit.
- Vertical discharge, four bladed condenser fan and top grille guard provides quiet operation.
- Totally enclosed and permanently lubricated PSC condenser motor utilizes 8 pole (840 RPM) operation.
- Hermetically sealed compressor with internal pressure relief valve.
- Latest technology compressor sound blanket.
- Copper tube, aluminum finned coil construction.
- Brass suction and liquid shut off valve with sweat connections.
- Fully charged for 15' [4.57m] feet of tubing length.
- High capacity large diameter liquid line filter drier, factory installed.

Cabinet Construction Features

- New polyester powder paint provides premium durability and improved UV protection.
- Heavy gauge, zinc-clad, G90 galvanized steel.
- Bottom pan rails elevating unit above slab.

Made in the USA by:

Goodman Manufacturing Company, L.P.

SS-338D

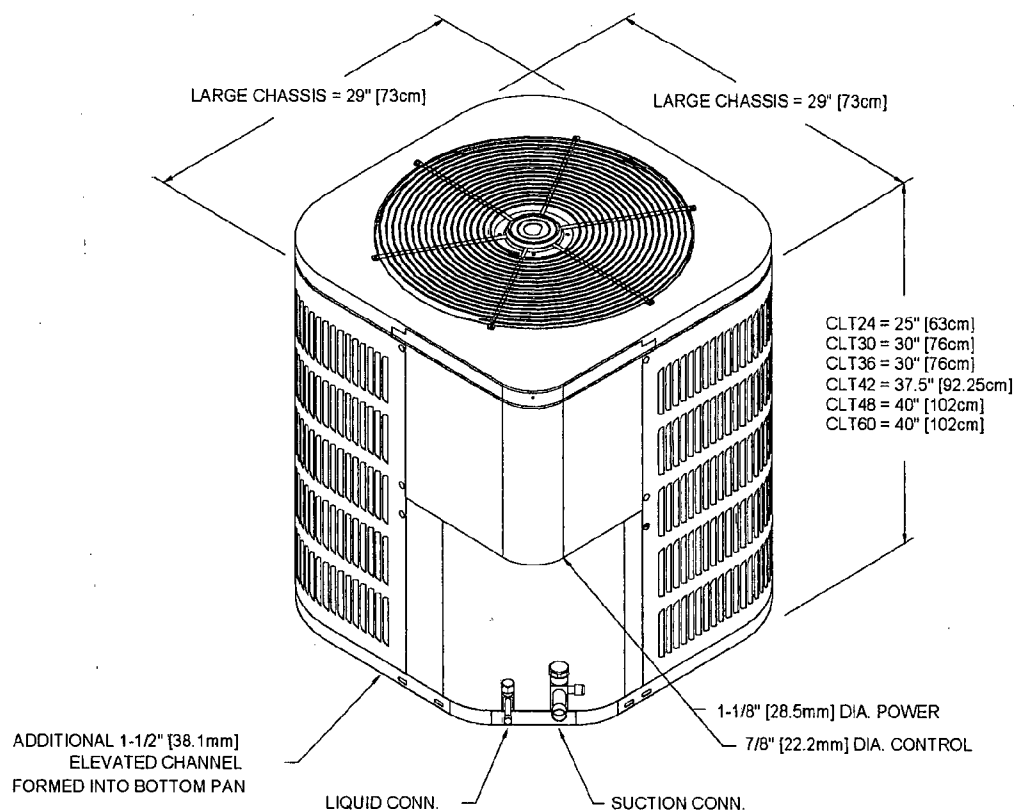
2550 North Loop West, Suite 400 - Houston, Texas 77092
www.goodmanmfg.com

CLT SERIES 4/02

Physical Data

Model	Liquid Connection	Suction Connection	Type	Approx. Shipping Weight
CLT24-1A	3/8 [9.5mm]	3/4 [19mm]	Sweat	173 [78.5kg]
CLT30-1A	3/8 [9.5mm]	3/4 [19mm]	Sweat	208 [94.3kg]
CLT36-1A	3/8 [9.5mm]	7/8 [22.2mm]	Sweat	209 [94.8kg]
CLT42-1A	3/8 [9.5mm]	7/8 [22.2mm]	Sweat	258 [117.0kg]
CLT48-1A	3/8 [9.5mm]	7/8 [22.2mm]	Sweat	270 [122.5kg]
CLT60-1	3/8 [9.5mm]	7/8 [22.2mm]	Sweat	271 [122.9kg]

DIMENSIONAL DATA CLT24-60 MODELS



Electrical Data

Model	Volts	PH	+Minimum Circuit Ampacity	*Maximum Overcurrent Protection	Maximum Volts	Minimum Volts	Compressor		Cond. Fan	
							RLA	LRA	FLA	HP
**CLT24-1A	208/230	1	12.9	20	253	197	9.6	45	0.9	1/6
**CLT30-1A	208/230	1	16.2	30	253	197	12.2	63	0.9	1/6
**CLT36-1A	208/230	1	20.1	30	253	197	14.8	83	1.6	1/4
**CLT42-1A	208/230	1	22.4	40	253	197	16.6	95	1.6	1/4
**CLT48-1A	208/230	1	24.1	40	253	197	18.0	104	1.6	1/4
**CLT60-1	208/230	1	26.5	50	253	197	19.9	137	1.6	1/4

*May use fuses or HACR type Circuit Breakers of the same size as noted.

+Wire size should be determined in accordance with National Electrical Codes. Extensive wire runs will require larger wire sizes.

**With Scroll Compressor.

Performance Ratings

Condenser Model	Evaporator Model	Total BTUH [Kw]		Sensible BTUH [Kw]		(1) SEER	(2) EER	SRN/ BELS
CLT24-1A	AR24-1/AC24-XX/AW24-XX	21000	[6.1]	15500	[4.5]	12.00	11.00	7.4
	AWB24-XX	22000	[6.4]	16500	[4.8]	12.00	11.00	
	HT1830/U29/UC29/H24F+EEP	21000	[6.1]	15500	[4.5]	12.00	11.00	
	U31+EEP	22000	[6.4]	16500	[4.8]	13.00	11.80	
	HT3236/U32/UC32/H36F+EEP	22000	[6.4]	16500	[4.8]	13.00	11.80	
	AWB36-XX/AR32-1	22000	[6.4]	16500	[4.8]	13.00	11.80	
	HT4248/U42/UC42/H49F+EEP	22400	[6.6]	16800	[4.9]	13.00	11.80	
	AER24-1/AE24-XX	22400	[6.6]	16800	[4.9]	14.00	13.00	
	H36F+GMPE075-3	22000	[6.4]	16500	[4.8]	14.00	13.00	
	U32/UC32+GMPE075-3	22000	[6.4]	16500	[4.8]	14.00	13.00	
	HT3236+GMPE075-3	22000	[6.4]	16500	[4.8]	14.00	13.00	
	U42/UC42+GMPE075-3	22400	[6.6]	16800	[4.9]	14.00	13.00	
CLT30-1A	H49F+GMPE075-3	22400	[6.4]	16800	[4.9]	14.00	13.00	7.4
	HT4248+GMPE075-3	22400	[6.4]	16800	[4.9]	14.00	13.00	
	AWB30-XX/AR30-1/AW30-XX	25600	[7.5]	18000	[5.3]	12.00	11.00	
	AC30-XX	26000	[7.6]	19250	[5.6]	12.60	11.50	
	AWB36-XX/AR36-1	26000	[7.6]	18400	[5.4]	12.50	11.50	
	HT3236/U32/UC32/H36F+EEP	26600	[7.8]	20100	[5.9]	13.00	11.80	
	U31+EEP/AR32-1	26600	[7.8]	20100	[5.9]	13.00	11.80	
	HT4248/U42/UC42/H49F+EEP	27000	[7.9]	20250	[5.9]	13.00	11.80	
	AER36-1/AE36-XX	28000	[8.1]	21000	[6.1]	14.00	13.00	
	U42/UC42+GMPE075-3	27000	[7.9]	20250	[5.9]	14.00	13.00	
	H49F+GMPE075-3	27000	[7.9]	20250	[5.9]	14.00	13.00	
	HT4248+GMPE075-3	27000	[7.9]	20250	[5.9]	14.00	13.00	
CLT36-1A	AC36-XX	33800	[9.9]	25000	[7.3]	12.00	11.00	7.4
	U36/UC36+EEP	34000	[10.0]	23800	[7.0]	12.00	11.00	
	AWB36-XX/AR36-1	34000	[10.0]	23800	[7.0]	12.00	11.00	
	AR42-1	35000	[10.2]	24800	[7.3]	12.50	11.40	
	HT4248+EEP	33800	[9.9]	23600	[6.9]	12.50	11.40	
	U42/UC42/H49F+EEP	35000	[10.2]	24800	[7.3]	12.50	11.40	
	U47/UC47+EEP	36000	[10.5]	26200	[7.7]	13.00	11.80	
	AR48-1	36000	[10.5]	26200	[7.7]	13.00	11.80	
	HT4860/U49/UC49/H60F+EEP	36000	[10.5]	26200	[7.7]	13.00	11.80	
	AER36-1/AE36-XX	36000	[10.5]	26000	[7.6]	14.00	13.00	
	U49/UC49+GMPE075-3	36000	[10.5]	26000	[7.6]	13.50	12.50	
	H60F+GMPE075-3	36000	[10.5]	26000	[7.6]	13.50	12.50	
	HT4860+GMPE075-3	36000	[10.5]	26000	[7.6]	13.50	12.50	
	U49/UC49+GMPE100-4	36000	[10.5]	26000	[7.6]	14.00	13.00	
	H60F+GMPE-4	36000	[10.5]	26000	[7.6]	14.00	13.00	
	HT4860+GMPE100-4	36000	[10.5]	26000	[7.6]	14.00	13.00	
CLT42-1A	U49/UC49+GMPE125-5	36000	[10.5]	26000	[7.6]	14.00	13.00	7.6
	H60F+GMPE125-5	36000	[10.5]	26000	[7.6]	14.00	13.00	
	HT4860+GMPE125-5	36000	[10.5]	26000	[7.6]	14.00	13.00	
	HT4248/U42/UC42/H49F+EEP	39000	[11.4]	28000	[8.2]	12.00	11.00	
	AR42-1	39000	[11.4]	28000	[8.2]	12.00	11.00	
	AR48-1	40000	[11.7]	29000	[8.5]	12.50	11.50	
	HT4860/U60/UC60/H60F+EEP	40000	[11.7]	29000	[8.5]	12.50	11.50	
	AR49-1	41000	[12.0]	30000	[8.8]	13.00	11.80	
	HT61/U61/UC61/H61F+EEP	41000	[12.0]	30000	[8.8]	13.00	11.80	
	U62/UC62+EEP	41000	[12.0]	30000	[8.8]	13.00	11.80	
	AER48-1/AE48-XX	41000	[12.0]	30000	[8.8]	14.00	13.00	
	U61/UC61+GMPE100-4	41000	[12.0]	30000	[8.8]	14.00	13.00	
	U62/UC62+GMPE100-4	41000	[12.0]	30000	[8.8]	14.00	13.00	
	H61F+GMPE100-4	41000	[12.0]	30000	[8.8]	14.00	13.00	
	HT61+GMPE100-4	41000	[12.0]	30000	[8.8]	14.00	13.00	
	U61/UC61+GMPE125-5	41000	[12.0]	30000	[8.8]	14.00	13.00	
	H61F+GMPE125-5	41000	[12.0]	30000	[8.8]	14.00	13.00	
	HT61+GMPE125-5	41000	[12.0]	30000	[8.8]	14.00	13.00	

Performance Ratings Cont.

Condenser Model	Evaporator Model	Total BTUH [Kw]		Sensible BTUH [Kw]		(1) SEER	(2) EER	SRN/ BELS
CLT48-1A	U49/UC49/H49F+EEP	43000	[12.6]	31000	[9.0]	12.50	11.50	7.6
	AR48-1	43500	[12.7]	32000	[9.4]	12.50	11.50	
	AR49-1	44000	[12.9]	33000	[9.7]	13.00	11.80	
	HT4860/U60/UC60/H60F+EEP	44000	[12.9]	33000	[9.7]	12.50	11.50	
	AER48-1/AE48-XX	44500	[13.0]	33200	[9.7]	13.50	12.50	
	U62/UC62+EEP	44500	[13.0]	33400	[9.8]	13.00	11.80	
	HT61/U61/UC61/H61F+EEP	45000	[13.2]	33700	[9.9]	13.00	11.80	
	U61/UC61+GMPE100-4	45000	[13.2]	33700	[9.9]	13.50	12.50	
	H61F+GMPE100-4	45000	[13.2]	33700	[9.9]	13.50	12.50	
	HT61+GMPE100-4	45000	[13.2]	33700	[9.9]	13.50	12.50	
	U61/UC61+GMPE125-5	45000	[13.2]	33700	[9.9]	13.50	12.50	
	H61F+GMPE125-5	45000	[13.2]	33700	[9.9]	13.50	12.50	
HT61+GMPE125-5	45000	[13.2]	33700	[9.9]	13.50	12.50		
CLT60-1	U62/UC62+EEP	52000	[15.2]	39700	[11.6]	12.50	11.50	7.6
	AR60-1	52000	[15.2]	39700	[11.6]	12.00	11.00	
	HT61/U61/UC61/H61F+EEP	52000	[15.2]	39700	[11.6]	13.00	11.80	
	AR61-1	53000	[15.5]	40200	[11.8]	12.50	11.50	
	AER60-1AE60-XX	53000	[15.5]	40200	[11.8]	13.00	12.00	
	U61/UC61+GMPE125-5	53000	[15.5]	40200	[11.8]	13.00	12.00	
	U62/UC62+GMPE125-5	53000	[15.5]	40200	[11.8]	13.00	12.00	
	H61F+GMPE125-5	53000	[15.5]	40200	[11.8]	13.00	12.00	
	HT61+GMPE125-5	53000	[15.5]	40200	[11.8]	13.00	12.00	

- 1) Seasonal Energy Efficiency Ratio
- 2) Energy Efficiency Ratio @ 80°F/67°F [26.6°C/19.4°C] Inside - 95°F [35°C]
- 3) When matching the outdoor unit to the indoor unit, use the piston supplied with the outdoor unit or that specified on the piston kit chart supplied with the indoor unit.
- 4) Note: XX Of A Model Designate Electric Heat Quantity.
EEP - Order From Service Dept. Part No. B13707-38 or new Solid State Board B13707-35S. Part No. B13707-38 is *not interchangeable* with B13707-35S.

The Goodman Gas Furnace contains the EEP cooling time delay.

NOTE: SPECIFICATIONS AND PERFORMANCE DATA LISTED HEREIN ARE SUBJECT TO CHANGE WITHOUT NOTICE.

Quality Makes the Difference!

All of our systems are designed and manufactured with the same high quality standards regardless of size or efficiency. Our designs virtually eliminate the most frequent causes of product failure. They are simple to service and forgiving to operate. We use the highest quality materials and components available because if a part fails then the unit fails. Finally, every unit is run tested before it leaves the factory. That's why we know...

There's No Better Quality.

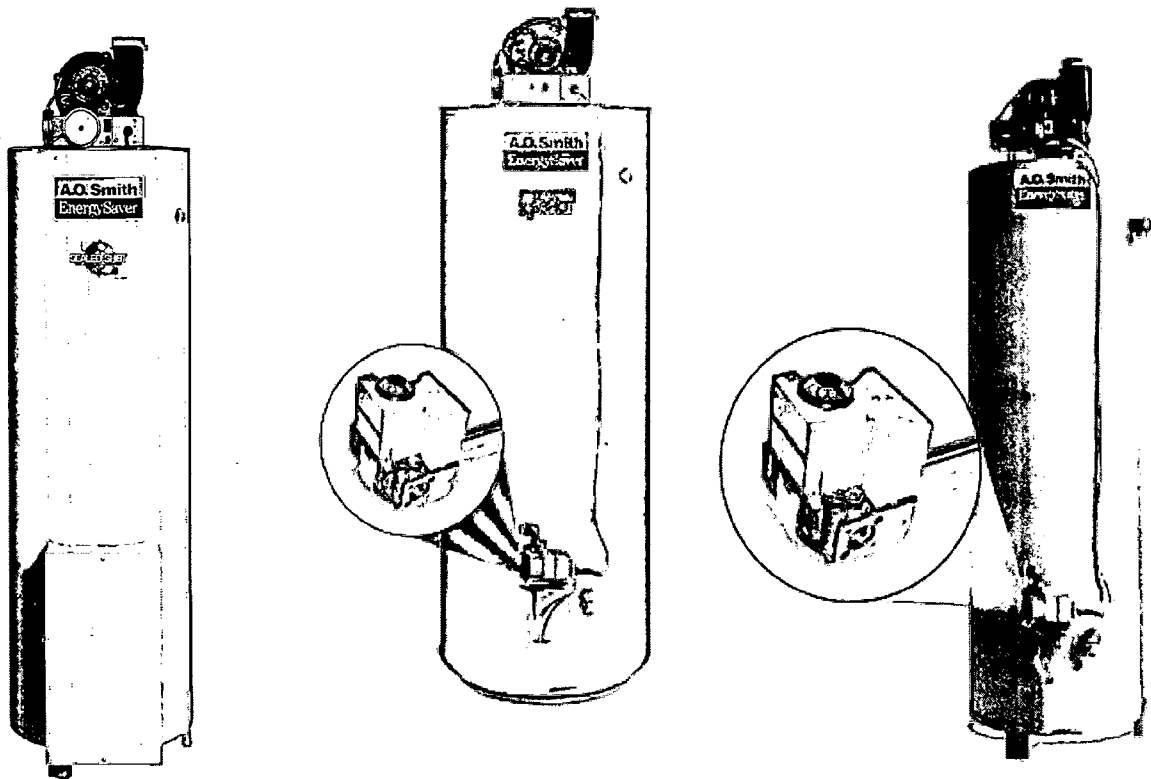
Visit our web site at www.goodmanmfg.com for information on:

- Goodman products
- Warranties
- Customer Services
- Parts
- Contractor Programs and Training
- Financing Options

A.O. Smith Water Products Company

FPD, FPST, FPSH AND FPCR

Service Handbook



**Models FPD-Series 234, 235 &
Models FPST, FPSH, FPCR, AND FPD
Series 250, 251
(250,251 Series Models use the
Honeywell Smart Valve™)**

**Prepared by
Technical Training Department
Irving, Texas**

Printed in USA 0200
\$12.00

Part No. TC-048 R2

Residential, Power Vented, Gas Products Service Handbook

TABLE OF CONTENTS

	PAGE		PAGE
Introduction	1	FPST Models 250, 251 Series	
Preservice Checklist	2	Description	26
Exterior Vent Clearances	3	Venting Information	26-27
FPD 234,235 Series Service		Blower Information	28
Index	4	Burner Information	28-29
Product Information	5-7	FPSH, FPCR Models	
Sequence of Operation	8	Description	30
Wiring Diagram	9	Venting Information	30
Service Steps	10	Blower Information	31
Tank Calling for Heat No Blower	10-12	Burner Information	31-32
Blower On - No Power to Module	12-14	FPD Models 250, 251 Series	
Blower On - No Ignition	15-16	Description	33
HSI Check	17-20	Venting Information	33
Gas Valve Check	19	Blower Information	33-34
Parts List	21-22	Burner Information	34
FPST, FPSH, FPCR AND FPD		All 250, 251 Series	
250, 251 Series Service	23	Sequence of Operation	35
SmartValve™ Information	24	Wiring Diagram	36
Ignition Module Portion	24	L.E.D. Indications	37
Thermostat Portion	25	Troubleshooting	
Gas Valve Portion	26	Voltage Polarity Check	38
		Blocked Exhaust Switch Test	39
		Blocked Intake Switch Test (FPD)	40
		HSI Check	41-42
		Gas Pressure Check	43
		Flame Sensor Check	43
		FPD Parts List	44-46

HANDBOOK INTRODUCTION

The service handbook is designed to aid in servicing and troubleshooting A.O. Smith residential, power vented, water heaters in the field. No duplication or reproduction of this book may be made without the express written authorization of the A.O. Smith Water Products Company.

The following text and illustrations will provide you with a step by step procedure to verify proper installation, operation, and troubleshooting procedures. Additional quick reference data is included to assist you in servicing these products.

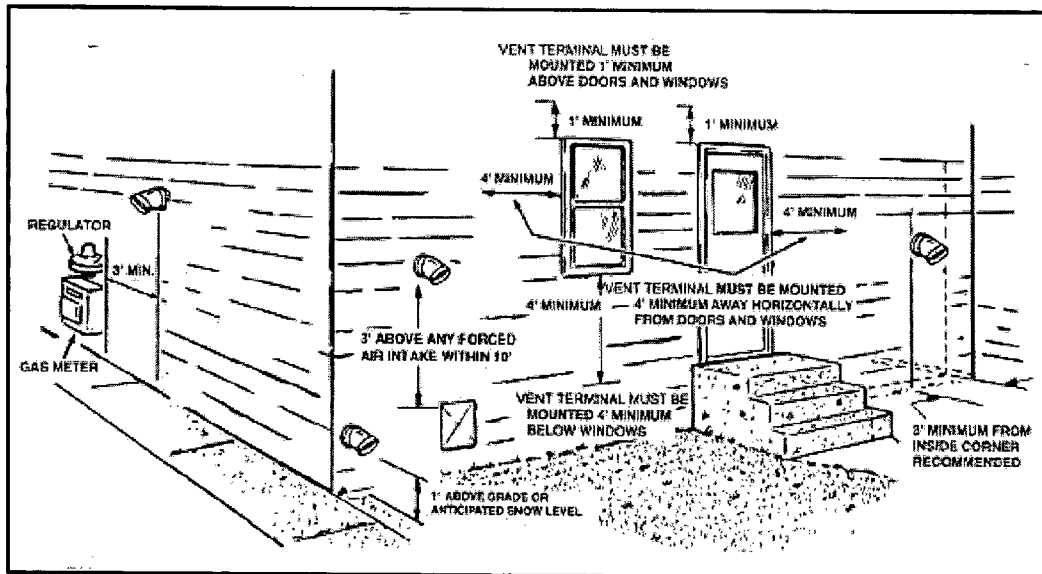
The information contained in this handbook is designed to answer commonly faced situations encountered in the operation of this product line and is not meant to be all inclusive. If you are experiencing a problem not covered in this handbook, please contact A.O. Smith Technical Information at 1-800-527-1953 or your local A.O. Smith Water Products company representative for further assistance. This handbook is intended for use by licensed plumbing professionals and reference should be made to the installation manual accompanying the product. This handbook contains supplemental information to the product's installation and operation manual.

Revision 1 deletes reference to sections of SmartValve™ being available.

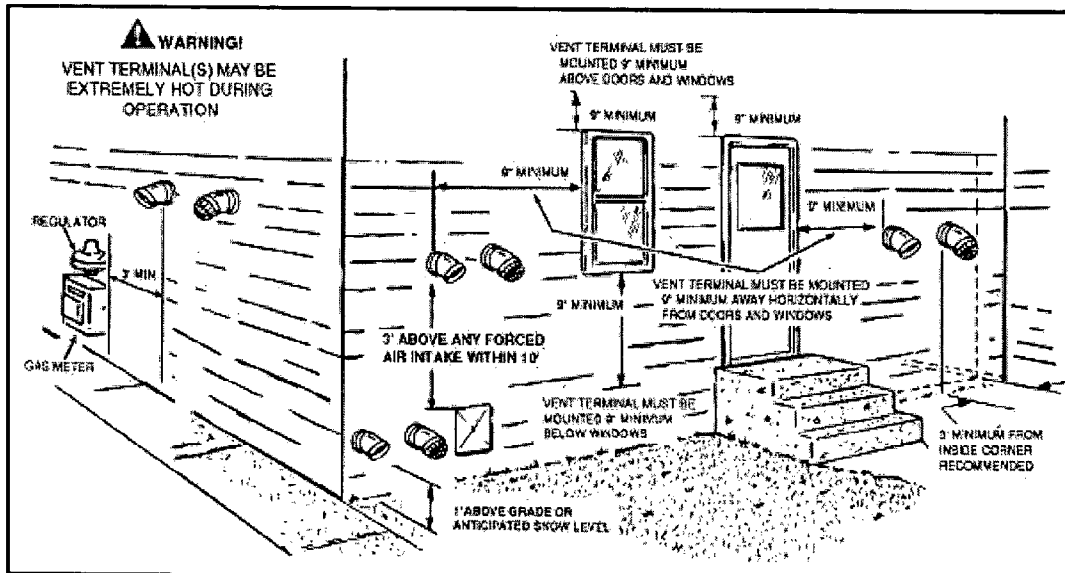
Revisions 2 adds FPST, FPSH, and FPCR information.

Residential, Power Vented, Gas Products Service Handbook

EXTERIOR VENT CLEARANCES FPST, FPSH, FPCR

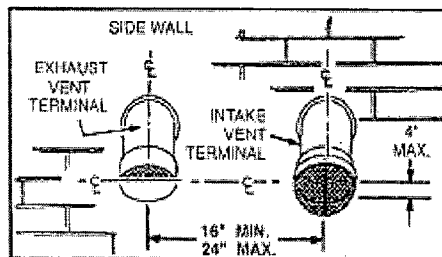


EXTERIOR VENT CLEARANCES FPD



Multiple Units?

- Maintain Clearances
- All intakes above all exhausts.



Maximize distance between intake and exhaust in locations where outside air may be below freezing. This will minimize the chances of exhaust gases frosting over the air intake.

Residential, Power Vented, Gas Products Service Handbook

INSTALLATION

See Heater Installation Manual for Details

Models FPST, FPSH and FPCR use room air for combustion and may exhaust vent through the side wall or roof.

Model FPD uses outside air, drawn directly to the heater through piping, for combustion air and may vent through the sidewall or roof

Flammables	Always keep flammable items and vapors away from a water heater. On direct vent models, be certain that no flammable vapors could be drawn into the air intake from outdoors.
-------------------	---

PRE-SERVICE CHECKLIST

- Reference the water heater installation and operation manual that applies to your water heater.
- Also reference the water heater model and rating plate on the upper, front of the water heater (White paper, black print, star in a circle logo in lower, right corner)
- Before doing anything, take note of present status.
 - 1) Blower on or off
 - 2) Igniter glowing or off
 - 3) "SmartValve" models have a white L.E.D. next to the temperature knob. Is this off, on, dim flashing? If flashing, how many times (2-6) between 2 second delays?
 - 4) Does hot water temperature (at a nearby faucet) indicate the water heater should be satisfied or heating?
 - 5) Note status of doors, windows, fans, etc. that may affect room conditions.
 - 6) Could outdoor winds be affecting exhaust and/or intake vent conditions?

It may be advisable to conduct electrical tests – working up the "sequence of operation" ladder – before resetting the electrical system

- 7) Installation: Per installation manual instructions
- 8) Tank full of water
- 9) Proper gas-natural or propane
- 10) Proper gas supply pressure
- 11) Installed, new, temperature and pressure relief valve
- 12) Installed expansion tank-necessary
- 13) Exhaust piping installed per instruction manual. Condensate free to drain
- 14) Air intake vent (Direct vent installations only) properly installed
- 15) Exterior clearances per code
- 16) No flammable or corrosive vapors near the heater or air intake
- 17) Supply voltage-Proper polarity (Neutral to ground check $\pm$ '0' VAC: "Hot" to ground=115-125 VAC)
- 18) Water heater electrical system is grounded