ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received: 03/25/2009
Control #: 06-0687-B

Date Issued: 04/06/2009
Permit #: E06-0687-B

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

Block-Lot: 3401-13 _____Qualification Code:

Work Site Location: 260 VAN NOSTRAND AVE ENGLEWOOD, NJ

Owner in Fee: RABBENOU

Tel.: 201/569-8007 E-mail:

Address: 260 VAN NOSTRAND AVE
ENGLEWOOD, NJ 07631-

Contractor: GILSON & SONS INC Tel.: 201/818-1100

Address: 20 INDUSTRIAL AVE UPPER SADDLE RIVER, NJ 07458- E-mail:

Contractor License No.: 3023A Exp. Date:

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

Federal Emp. ID No.: 22-1499251 FAX: 201/818-0383

B. BUILDING CHARACTERISTICS

Use Group: Present: R-3 Proposed: R-3

Pole/Pad: ☐ Temporary: ☐ Other:

Building Occupied as: Utility Co.:

Est. Cost of Elect Work: $300.00

JOB SUMMARY (Office Use Only)

Plan Review

[ ] No Plans Required

Date:_____ Approved by:_____

[ ] Partial -Underslab Utilities Approved

Date:_____ Approved by:_____

[ ] Electrical Plans Approved

Date:_____ Approved by:_____

Joint Plan Review Required:

[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date:_____

Approved by:_____

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

SUBCODE APPROVAL for CERTIFICATE

[__] CO [__] CCO [__] CA

Date:_____

Approved By:_____

Temp. Cut-in-Card Date Issued _____

Final Cut-in-Card Date Issued _____

Annual Pool Inspection _____ _____ _____ _____

Date of Grounding and Bonding Certification _____

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

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

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.

Applicant/Contractor
Sign here: _____
Print name here: _____

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK BOILER,BACKFLOW

QTY	SIZE	ITEMS	FEE (Official Use Only)
0		Lighting Fixtures	
0		Receptacles	
1		Switches	
0		Detectors	
0		Light Poles	
0		Motors - Fract. HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
		_____	
1		TOTAL NUMBERS	100.00
0		Pool Permit/with UW Lights	0.00
0		Storable Pool/Spa/Hot Tub	0.00
0	0	KW Elec. Range/Receptacle	0.00
0	0	KW Oven/Surface Unit	0.00
0	0	KW Elec. Water Heater	0.00
0	0	KW Elec. Dryer/Receptacle	0.00
0	0	KW Dishwasher	0.00
0	0	HP Garbage Disposal	0.00
0	0	KW Central A/C Unit	0.00
0	0	HP/KW Space Heater/Air Handler	0.00
0	0	KW Baseboard Heat	0.00
		KW Motors 1/+ HP	0.00
	over 500	KW Transformer/Generator	0.00
	over 1000	AMP Service	0.00
	over 1000	AMP Subpanels	0.00
	over 1000	AMP Motor Control Center:	0.00
0	0	KW Elec. Sign/Outline Light	0.00
0		Other	0.00

Administrative Surcharge	$0.00
Minimum Fee	$0.00
State Permit Surcharge Fee	$1.00
TOTAL FEE	$101.00