



# MECHANICAL SUBCODE TECHNICAL SECTION

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

Block/Lot: \_\_\_\_\_ Qualification Code: \_\_\_\_\_

Work Site Location: 322 West ENGLEWOOD Avenue ,

Owner in Fee: US BANK NA AS TRUSTEE C/O GREG OLSON

Tel. (888) 572-6950

Address 322 West ENGLEWOOD Avenue ,

Contractor: PEGASUS ELECTRIC CORP. \_\_\_\_\_ Tel. (201) 874-7512

Address: 39 WEST 19TH STREET WEEHAWKEN, NJ \_\_\_\_\_ e-mail

Contractor License No. or Builder Registration No. 1387 Exp. Date

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

Federal Emp. ID No. 22-2494521 FAX:

## JOB SUMMARY (Office Use Only)

| Plan Review                                                                                                                    | Date | Initial | INSPECTIONS     | Dates   | (Month/ Day)             |
|--------------------------------------------------------------------------------------------------------------------------------|------|---------|-----------------|---------|--------------------------|
| <input type="checkbox"/> No Plans Required                                                                                     |      |         | Type            | Failure | Failure Approval Initial |
| <input type="checkbox"/> All                                                                                                   |      |         | Gas Piping      | _____   | _____                    |
| <input type="checkbox"/> Footing                                                                                               |      |         | Appliance       | _____   | _____                    |
| <input type="checkbox"/> Foundation                                                                                            |      |         | Chimney/Vent    | _____   | _____                    |
| <input type="checkbox"/> Frame                                                                                                 |      |         | Oil Piping      | _____   | _____                    |
| <input type="checkbox"/> Other                                                                                                 |      |         | Oil Tank        | _____   | _____                    |
|                                                                                                                                |      |         | LPG Tank        | _____   | _____                    |
| Joint Plan Review Required:                                                                                                    |      |         | Hydronic Piping | _____   | _____                    |
| <input type="checkbox"/> Elec. <input type="checkbox"/> Plumb. <input type="checkbox"/> Fire <input type="checkbox"/> Elevator |      |         | Fireplace       | _____   | _____                    |
| SUBCODE APPROVED for PERMIT:                                                                                                   |      |         | Chimney Cert.   | _____   | _____                    |
| Date: _____                                                                                                                    |      |         | Other _____     | _____   | _____                    |
| Approved By: _____                                                                                                             |      |         |                 |         |                          |
| SUBCODE APPROVAL for CERTIFICATE                                                                                               |      |         |                 |         |                          |
| <input type="checkbox"/> CCO <input type="checkbox"/> CA                                                                       |      |         |                 |         |                          |
| Date: _____                                                                                                                    |      |         |                 |         |                          |
| Approved By: _____                                                                                                             |      |         |                 |         |                          |

## B. MECHANICAL CHARACTERISTICS

Use Group Present:

Proposed:

**Heating System Work:**

Type:

Fuel Type: \_\_\_\_\_ If Other:

Estimated Cost of Mechanical Work: \$7,000.00



Date Received: 07/09/2020  
Control #: 20-001261

Date Issued:  
Permit #: CM20-000115

## C. CERTIFICATION IN LIEU OF OATH

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

Sign here: \_\_\_\_\_

Print name here: \_\_\_\_\_

## D. TECHNICAL SITE DATA

DESCRIPTION OF WORK  
NEW A/C, FURNACE AND WATER HEATER

| NO. | Fixture/Equipment | FEE (Official Use Only) |
|-----|-------------------|-------------------------|
| 1   | Hot water heater  | 75.00                   |
| 0   | Fuel Oil piping   | 0.00                    |
| 1   | Gas Piping        | 50.00                   |
| 0   | Steam Boilers     | 0.00                    |
| 0   | Hot Water Boiler  | 0.00                    |
| 1   | Hot Air Furnace   | 0.00                    |
| 0   | Oil Tank          | 0.00                    |
| 0   | LPG Tank          | 0.00                    |
| 0   | Fireplace         | 75.00                   |
| 0   | Other             | 0.00                    |
|     |                   | 75.00                   |
|     |                   | 0.00                    |
|     |                   | 13.30                   |
|     |                   | 0.00                    |

|                            |                 |
|----------------------------|-----------------|
| Administrative Surcharge   | \$0.00          |
| Minimum Fee                | \$0.00          |
| State Permit Surcharge Fee | \$0.00          |
| <b>TOTAL FEE</b>           | <b>\$288.30</b> |

U.C.C. F110 (rev. 11/09) \_\_\_\_\_  
Internet version \_\_\_\_\_

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