



Howell Township
4567 ROUTE 9 NORTH (2nd FLOOR)
PO BOX 580
HOWELL, NJ 07731

Date Issued 4/21/2023
Control Number C-61344
Permit Number 20230679
Permit Issue Date 3/31/2023
Certificate Number 20230679

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 384 ALDRICH ROAD Howell Township, NJ 07731 Block: 59 Lot: 1.17 Qual: _____
Owner in Fee: SUCHECKI, KYLE RAY & HARDEE, TAYLOR
Owner Address: 384 ALDRICH RD HOWELL NJ 07731
Telephone: [REDACTED]
Contractor PALMER'S HVAC, LLC
Address 2008 ALLENWOOD ROAD WALL NJ 07719
Telephone: (732) 859-2332 Fax: _____ Federal Emp. Number: [REDACTED]
License Number or Builders Registration Number: _____
Home Warranty Number: _____ Type of Warranty Plan: ☐ State ☐ Private
Use Group: R-5 Construction Classification: 5B
Maximum Live Load: 0 Maximum Occupancy Load: 0
Description of Work/Use: HEAT PUMP, MINI SPLIT A/C SYSTEM

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

Date Printed: 4/21/2023

U.C.C. F260 (rev. 08/05)

Fee: \$0.00

Check Number: _____

Collected By: _____

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MECHANICAL INSPECTOR TECHNICAL SECTION



59-1.17

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

Block 59 Lot 1.17

Qualification Code

Work Site Location 384 Aldrich Road

Hanell, NJ 07731

Owner in Fee: Kyle Suchetki

Tel. () e-mail

Address 384 Aldrich Road, Hanell, NJ 07731

street municipality

Contractor: Palmar's HVAC, LLC

Tel. () 772.659.2332

zip code

Address 2008 Allinwood Road

e-mail PHVAC119@aol

Well, NJ 07719

Home Improvement License No. or Builder Registration No. 19HLC00899300

Exp. Date 6/30/24

Contractor Registration No. or Exemption Reason (if applicable): 13VH04716500

Federal Emp. ID No.

FAX: ()

B. MECHANICAL CHARACTERISTICS

Use Group: Present: R-3, R-4 or R-5 (circle one) Proposed: R-3, R-4 or R-5 (circle one)

Heating System work: ☒ New OR ☐ Modification to Existing OR ☐ Conversion OR ☐ Replacement

Type: ☐ Hydronic ☐ Hot Air • Heat Pump mini-split

Fuel Type: ☐ Gas ☐ Oil ☒ Electric ☐ Solar ☐ Other

Estimated Cost of Mechanical Work \$ 4,000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☒ No Plans Required

☐ Mechanical Plans Approved

Date 3-9-23 Approved by:

Joint Plan Review Required:

☐ Bldg. ☐ Elec. ☐ Plumb. ☐ Fire.

☐ Elev.

SUBCODE APPROVAL FOR PERMIT

Date: 3-9-23

Approved by:

SUBCODE APPROVAL FOR CERTIFICATE

Date: 4-19-23

Approved by:

INSPECTIONS

Type:

Gas Piping

Appliance

Chimney/Vent

Oil Piping

Oil Tank

LP Gas Tank

Hydronic Piping

Fireplace

Chimney Cert.

Other MAINT. SPLIT

DATES

Failure

Failure

Approval

Initial

4-19-23

4-19-23

TS

TS

TS

TS

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:

Barry Palmer

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Installing a outdoor mini-split - 18,000 BTUs
1. 9,000 BTUs
1. 12,000 BTUs
Heat Pump with A.C.

NO.

FIXTURE/EQUIPMENT

Water Heater

Fuel Oil Piping Connections

Gas Piping Connections

Steam Boiler

Hot Water Boiler

Hot Air Furnace

Oil Tank

LP Gas Tank

Fireplace

Other

Administrative Surcharge \$ 85
Minimum Fee \$ 85
State Permit Surcharge Fee \$ 93
TOTAL FEE \$ 93

Date Received

Control #

0-461344

Date Issued

3/13/23

Permit #

20230679



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 59 Lot 1.17 Qualification Code _____
Work Site Location 384 ALDRICH RD Howell NJ 07731

Owner in Fee: Kyle Suckneck

Tel. () _____ e-mail _____

Address 384 ALDRICH RD Howell NJ 07731

Contractor: Kelly Suckneck Tel. () 732-272-5866 zip code _____

Address 930 4th Ave Howell NJ e-mail kelly@suckneck.com

Contractor License No. 11821 Exp. Date 3/24

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

Federal Emp. ID No. _____ FAX: () _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 250.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
		Type:	Failure	Approval	Initial
[] No Plans Required					
[] Partial - Under-slab Utilities Approved		Rough			
Date: _____	Approved by: _____	Barrier-Free			
[] Electric Plans Approved		Trench			
Date: _____	Approved by: _____	Temp. Serv.			
[] Electric Plans Approved		Constr. Serv.			
Date: _____	Approved by: _____	ICO			
Joint Plan Review Required:		Other			
[] Bldg. [] Plumb. [] Fire. [] Elev.		Service			
SUBCODE APPROVAL for CERTIFICATE		Final			
Date: _____	Approved by: _____	Barrier-Free			
SUBCODE APPROVAL for CERTIFICATE		Temp. Cut-in-Card Date Issued			
[] CO [] CCO [] CCA		Final Cut-in-Card Date Issued			
Date: <u>4-19-23</u>		Annual Pool Inspection			
Approved by: _____		Date of Grounding and Bonding			

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

D. TECHNICAL SITE DATA

Date Received _____
Control # 061344
Date Issued 3/31/23
Permit # 20230679

DESCRIPTION OF WORK

Install main split

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

with split

Administrative Surcharge \$	
Minimum Fee \$	
State Permit Surcharge Fee \$	
TOTAL FEE \$	<u>88</u>

UPDATED PLANS PER FRAMEWORK INSPECTOR.

