



**ELECTRICAL
SUBCODE
TECHNICAL SECTION**



Date Received 3/6/06
Date Issued
Control #
Permit # 06-0595

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

Block 673 Lot 13
Work Site Location 741 BRICK BOULEVARD
BRICK, NEW JERSEY
Owner in Fee/Occupant FRIENDLY'S
Address 741 BRICK BOULEVARD
BRICK, NEW JERSEY
Tele. (800) 576-8088 XT: 3326
Contractor HOWARD A. SCHLEICH SR
Address 2215 HADLEY CT
WALL, NJ. 07719
Tele. (732) 681-9493 Fax () SAME
Lic. No. 6481
Federal Emp. No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [] Other
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ 3500

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)			
[] No Plans Required			Type:	Failure	Failure	Approval	Initial
Joint Plan Review Required:			Rough				
[] Building [] Plumbing			Temp. Serv.				
[] Fire [] Elevator			Constr. Serv.				
[X] Elec. Plans Approved			TCO				
Date: <u>3/6/06</u>			Other				
Approved by: <u>[Signature]</u>			Service				
			Final				

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date: _____

Approved by: _____

Temp. Cut-in-Card Date Issued _____

Final Cut-in-Card Date Issued _____

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
		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
		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
		Shedding Device

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$ _____
Minimum Fee \$ _____
DCA Training Fee \$ _____
TOTAL 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 and perform the work listed on this application.

Howard A. Schleich Sr.
Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Electrical Contractor [] Exempt Applicant

3-14-06

STEEP ON TID WRAP 5001 TIGHT
ON ROOF UNIT

CO-12-01