BLOCK 673 LOT 13 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 13-2453

CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII C-003244

I. IDENTIFICATION

1. Proposed Work Site at: 741 Brick Blvd Brick NJ 08723
2. Name of Owner in Fee: Ruben Acosta / Felix Mallalvo Lawyer
   Tel. (973) 485-9395 e-mail _____
   Address 732-998-6933 - when Permit is ready.
   street municipality zip code
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: GC - Luis Linares Tel. (732) 998-6933
   Address 144 Ashland Ave Bloomfield NJ e-mail luis.magnolia@
   Rep for G&J Eats LLC.
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. _____ FAX: ( ) _____
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. ( ) _____ FAX: ( ) _____
6. Responsible Person in Charge once Work has Begun _____
   Tel. ( ) _____ FAX: ( ) _____

V. FEE SUMMARY (for office use only)

		$	Update	Update
1.	Building	705	60	
2.	Electrical	90		50
3.	Plumbing		95	135
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal			
7.	Less 20% for State Plan Review	$		
8.	Subtotal	$		
9.	State Permit Surcharge Fee	5		1
10.	Subtotal	$	5	
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$ 1108	160	186

VI. BUILDING/SITE CHARACTERISTICS

(office use only)

1. Number of Stories _____
2. Height of Structure _____ ft.
3. Area — Largest Floor _____ sq. ft.
4. New Building Area _____ sq. ft.
5. Volume of New Construction _____ cu. ft.
6. Max. Live Load _____
7. Max. Occupancy Load _____
8. If Industrialized Building: State Approved ____ HUD ____
9. Total Land Area Disturbed _____ sq. ft.
10. Flood Hazard Zone _____
11. Base Flood Elevation _____ ft.
12. Wetlands yes ____ no ____

COMMERCIAL

IIa. PROPOSED WORK

Health Approved

- ☐ Minor Work
- ☐ New Building
- ☐ Addition
- ☐ Demolition
- ☐ Repair
- ☐ Alteration
- ☐ Renovation
- ☐ Reconstruction
- ☐ Asbestos Abat. -Subch. 8
- ☐ Lead Hazard Abatement
- ☐ Radon Remediation
- ☐ Annual Permit

IIb. SUBCODES

(Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building		CR 5-14-13			06/21/13	MEK			
☐ Electrical					6-25-13	BS			
☐ Plumbing					06-20-13	PA 6-20-13	PA 6-18-13 7-23-13		
☐ Fire Protection				6/21/13		JD	6/26/13		
☐ Elevator		Eng Exempt			6/19/13	ECE			
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   Gained, Sale _____
   Gained, Rental _____
   Lost, Sale _____
   Lost, Rental _____

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____
Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:
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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

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(f)1.ix:

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 _____ Date _____

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. 5:23-2.15(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.

X Agent Name Luis Linares ~~Property~~ Agent for G & J Eats LLC

Address _____

Telephone (732) 998-6933

Signature Luis Linares

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 10/8/2013
Control Number C-13-003244
Permit Number 13-2653
Permit Issue Date 6/21/2013
Certificate Number 13-2653

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 741 BRICK BLVD. Brick Township, NJ Block: 673 Lot: 13 Qual:

Owner in Fee: 226 MARKET REALTY LLC ATTN:R.ACOSTA

Owner Address: 15 EAST KINNEY ST NEWARK NJ 07102

Telephone: (973) 485-9395

Contractor G & J Eats LLC

Address 164 Ashland Ave. Brick NJ 08723

Telephone: (732) 998-6933 Fax:

License Number or Builders Registration Number:

Federal Emp. Number: 973 645-6042 (Juan gave number)

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: M Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: GAS PIPING, TENANT FIT UP

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: $0.00
Check Number:
Collected By:

Date Printed: 10/8/2013

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

CONSTRUCTION PERMIT

Date Issued 6-21-13
Control # C-13-003244
Permit # 13-1053

IDENTIFICATION Block: 673 Lot: 13 Qualifier
Work Site Location: 741 BRICK BLVD. Brick Township, NJ

Owner in Fee: 226 MARKET REALTY LLC ATTN:R.ACOSTA
15 EAST KINNEY ST NEWARK NJ 07102
Telephone: (973) 485-9395

Contractor G & J Eats LLC
Address 164 Ashland Ave. Brick NJ 08723
Telephone: (732) 998-6933
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 973 645-6042 (Juan gave number)

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
TENANT FIT UP

Note: If constuction 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 $7,390

David J. Newman Jr
Construction Official

6/21/13
Date

PAYMENTS (Office Use Only)

Building	$75
Electrical	$0
Plumbing	$80
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$13
CO Fee	
Other	$0
Total	$168
Check No.	1010
Cash	$0
Credit	$0
Collected By	

U.C.C. F170
equiv (rev 1/04)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

- [x] Required inspections for all subcodes for one- and two-family dwellings are as follows:
  1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
  2. Foundations and all walls up to grade level prior to back filling.
  3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
  4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

  Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

- [ ] Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

- [x] A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

- [x] A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

6-27-13

PERMIT UPDATE

Date Update Issued
Control # C-13-003244+A
Permit # +A

13-2653+A

IDENTIFICATION Block: 673 Lot: 13 Qualifier

Work Site Location: 741 BRICK BLVD. Brick Township, NJ

Owner in Fee: 226 MARKET REALTY LLC ATTN:R ACOSTA
15 EAST KINNEY ST NEWARK NJ 07102

Telephone: (973) 485-9395

Contractor: G & J Eats LLC
Address: 164 Ashland Ave. Brick NJ 08723

Telephone: (732) 998-6933
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 973 645-6042 (Juan gave number)

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☐ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☑ ELECTRICAL
- ☑ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:

electric/plumbing

Note: If constuction 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 $3,000

Construction Official — Date 6/27/13

U.G.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	$0
Electrical	$60
Plumbing	$0
Fire Protection	$95
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$5
CO Fee	
Other	$0
Total	$160
Check No.	
Cash 160	$0
Credit	$0
Collected By	

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☑ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☑ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☑ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

Called 4.12.13 JD

8/16/13

PERMIT UPDATE

Date Update Issued
Control # C-13-003898
Permit # 13-2653+B

IDENTIFICATION Block: 673 Lot: 13 Qualifier
Work Site Location: 741 BRICK BLVD. Brick Township, NJ
Owner in Fee: 226 MARKET REALTY LLC ATTN:R ACOSTA, 15 EAST KINNEY ST. NEWARK NJ 07102
Telephone: (973) 485-9395

Contractor: G & J Eats LLC
Address: 164 Ashland Ave. Brick NJ 08723
Telephone: (732) 998-6933
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 973 645-6042 (Juan gave number)

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☑ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☐ ELECTRICAL
- ☑ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:
GAS PIPING Gas pipes for (3) appliances

Note: If constuction 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 $600

David F Newman Jr 8/15/13
Construction Official — Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$50
Fire Protection	$135
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$1
CO Fee	
Other	$0
Total	$186
Check No.	1173
Cash	$0
Credit	$0
Collected By	

U.C.C. F170
equiv (rev 1/04)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

08/16/13 [illegible] 00135881577A
X10 SERV 010
PLUMB 50.00
FIRE 135.00
1.00
TOTAL 186.00

☑ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☑ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☑ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

Called 10/2/13 NB

10/3/13

PERMIT UPDATE

Date Update Issued
Control # C-13-005480
Permit # 13-2653+C

IDENTIFICATION Block: 673 Lot: 13 Qualifier

Work Site Location: 741 BRICK BLVD. Brick Township, NJ

Owner in Fee: 226 MARKET REALTY LLC ATTN:R.ACOSTA
15 EAST KINNEY ST NEWARK NJ 07102

Telephone: (973) 485-9395

Contractor: G & J Eats LLC
Address: 164 Ashland Ave. Brick NJ 08723

Telephone: (732) 998-6933
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 973 645-6042 (Juan gave number)

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☑ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☐ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:

Note: If constuction 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 $1,000

David J. Newman Jr 10/2/13
Construction Official — Date

PAYMENTS (Office Use Only)	
Building	$0
Electrical	$0
Plumbing	$50
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$2
CO Fee	1
Other	$0
Total	$52
Check No.	1190
Cash	$0
Credit	$0
Collected By	

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

10/03/13 12:[illegible] 00[illegible]

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

PLUMB $50.00
DCA $2.00
CHECK $52.00

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☑ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☑ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 7/5/2013
Control Number C-13-003244
Permit Number 13-2653
Permit Issue Date 6/21/2013
Certificate Number 13-2653

Certificate

Construction Code Division

(Temporary Certificate of Occupancy)

Identification

Work Site Location: 741 BRICK BLVD. Brick Township, NJ Block: 673 Lot: 13 Qual:

Owner in Fee: 226 MARKET REALTY LLC ATTN:R.ACOSTA

Owner Address: 15 EAST KINNEY ST NEWARK NJ 07102

Telephone: (973) 485-9395

Contractor G & J Eats LLC

Address 164 Ashland Ave. Brick NJ 08723

Telephone: (732) 998-6933 Fax:

License Number or Builders Registration Number:

Federal Emp. Number: 973 645-6042 (Juan gave number)

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: M Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: TENANT FIT UP

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: 7/26/2013
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: 7/26/2013
Conditions to be met:
update for gas fired appliances (plumbing/fire)

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 7/5/2013

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

741 BRICK BLVD
SHUT UP + EAT

Block 673 Lot 13

TOWNSHIP OF BRICK
DEPARTMENT OF INSPECTIONS

OCCUPANCY

OCCUPANT LOAD 68
LIVE LOAD _____ P. S. F.
FIRE GRADING _____ HOURS
USE GROUP _____

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 09/30/2013
Control Number C-13-003244
Permit Number 13-2653
Permit Issue Date 06/21/2013
Certificate Number 13-2653

Certificate

Construction Code Division

(Temporary Certificate of Occupancy)

Identification

Work Site Location: 741 BRICK BLVD. Brick Township, NJ Block: 673 Lot: 13 Qual:

Owner in Fee: 226 MARKET REALTY LLC ATTN:R.ACOSTA

Owner Address: 15 EAST KINNEY ST NEWARK NJ 07102

Telephone: (973) 485-9395

Contractor G & J Eats LLC

Address 164 Ashland Ave. Brick NJ 08723

Telephone: (732) 998-6933 Fax:

License Number or Builders Registration Number:

Federal Emp. Number: 973 645-6042 (Juan gave number)

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: M Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: GAS PIPING, TENANT FIT UP

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**
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or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

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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: 10/30/2013
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: 10/30/2013
Conditions to be met:

All issues to be worked out with plumbing inspector.

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 09/30/2013

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

APPLICATION FOR CERTIFICATE

Date Received	06/06/2013
Date Permit Issued	06/21/2013
Control #	C-13-003244
Permit #	13-2653
Date Issued	09/30/2013

IDENTIFICATION

Block 673 Lot 13 Qualifier

Work Site Location 741 BRICK BLVD. Brick Township, NJ

Owner in Fee 226 MARKET REALTY LLC ATTN:R ACOSTA
15 EAST KINNEY ST NEWARK NJ 07102

Telephone (973) 485-9395

Contractor G & J Eats LLC
Address 164 Ashland Ave. Brick NJ 08723

Telephone (732) 998-6933
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 973 645-6042 (Juan gave number)

ACTION

- ☐ CERTIFICATE OF OCCUPANCY
- ☐ CERTIFICATE OF CONTINUED OCCUPANCY
- ☐ LEAD HAZARD ABATEMENT CERTIFICATE OF CLEARANCE
- ☑ TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP Previous M Current

FINAL COST OF CONSTRUCTION: $ 7390
(Include value of any new structure, all on-site improvements, built-in furnishings and fixtures and all the integral equipment exclusive of process or manufacturing equipment.)

A set of "As Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

We are waiting for the Plumber to bring final Paper Work requested by inspector.

DESCRIPTION OF WORK/USE:
Alteration GAS PIPING TENANT FIT UP

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit, and regulations. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED: Juan Y Lucas Owner Agent
Owner/Agent

☐ OWNER

☑ AGENT

UCC F270 equiv.

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 8/30/2013
Control Number C-13-003244
Permit Number 13-2653
Permit Issue Date 6/21/2013
Certificate Number 13-2653

Certificate

Construction Code Division

(Temporary Certificate of Occupancy)

Identification

Work Site Location: 741 BRICK BLVD. Brick Township, NJ Block: 673 Lot: 13 Qual:

Owner in Fee: 226 MARKET REALTY LLC ATTN:R.ACOSTA

Owner Address: 15 EAST KINNEY ST NEWARK NJ 07102

Telephone: (973) 485-9395

Contractor G & J Eats LLC

Address 164 Ashland Ave. Brick NJ 08723

Telephone: (732) 998-6933 Fax:

License Number or Builders Registration Number:

Federal Emp. Number: 973 645-6042 (Juan gave number)

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: M Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: GAS PIPING, TENANT FIT UP

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.

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☐ 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: 9/30/2013
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: 9/30/2013
Conditions to be met:

Final plumbing inspection
BTUMA approval

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 8/30/2013

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 8/21/2013
Control Number C-13-003244
Permit Number 13-2653
Permit Issue Date 6/21/2013
Certificate Number 13-2653

Certificate

Construction Code Division

(Temporary Certificate of Occupancy)

Identification

Work Site Location: 741 BRICK BLVD. Brick Township, NJ Block: 673 Lot: 13 Qual:

Owner in Fee: 226 MARKET REALTY LLC ATTN:R.ACOSTA

Owner Address: 15 EAST KINNEY ST NEWARK NJ 07102

Telephone: (973) 485-9395

Contractor G & J Eats LLC

Address 164 Ashland Ave. Brick NJ 08723

Telephone: (732) 998-6933 Fax:

License Number or Builders Registration Number:

Federal Emp. Number: 973 645-6042 (Juan gave number)

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: M Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: GAS PIPING, TENANT FIT UP

Certificate Comments:

☐ **Certificate of Occupancy**
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Conditions to be met:

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☐ 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: 9/4/2013
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of: 9/4/2013
Conditions to be met:

final plumbing inspection
BTMUA approval

David J. Newman Jr.

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 8/21/2013

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 07/24/2013
Control Number C-13-003244
Permit Number 13-2653
Permit Issue Date 06/21/2013
Certificate Number 13-2653

Certificate

Construction Code Division

(Temporary Certificate of Occupancy)

Identification

Work Site Location: 741 BRICK BLVD. Brick Township, NJ Block: 673 Lot: 13 Qual:

Owner In Fee: 226 MARKET REALTY LLC ATTN:R.ACOSTA

Owner Address: 15 EAST KINNEY ST NEWARK NJ 07102

Telephone: (973) 485-9395

Contractor G & J Eats LLC

Address 164 Ashland Ave. Brick NJ 08723

Telephone: (732) 998-6933 Fax:

License Number or Builders Registration Number:

Federal Emp. Number: 973 645-6042 (Juan gave number)

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: M Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: GAS PIPING, TENANT FIT UP

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.

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Conditions to be met:

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☐ 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: 08/23/2013
Conditions to be met:

David J. Newman Jr

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 07/24/2013

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

BUILDING SUBCODE
TECHNICAL SECTION

Date Received / Control # 6-21-13

Date Issued / Permit # 13-2653

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 Qualification Code

Work Site Location 741 Brick Blvd. Brick NJ 08723

Owner in Fee: Ruben Acosta / Felix Moltavo Lawyer

Tel. 732-998-6933 e-mail

Address

Contractor: L&J Eats LLC, (street) Luis Linares (municipality) Tel. 732-998-6933 (zip code)

Address 164 Ashland Ave. e-mail

Brick Blvd Brick NJ 07003

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

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

Federal Emp. ID No. FAX:

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: Luis Linares

Print name here:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Floor Plan
Tenant F.t.u.P

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

- [ ] No Plans Required
- [✓] All 06/21/13 KLL
- [ ] Footings/Foundations
- [ ] Structural/Framework
- [ ] Exterior
- [ ] Interior

Joint Plan Review Required:
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date: 06/21/13
Approved by: KLL.

SUBCODE APPROVAL for CERTIFICATE
[✓] CO [ ] CCO [ ] CA
Date: 07/03/13
Approved by: KLL

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final	#6-2813		7-2-13	G.P.
Barrier-Free				

TYPE OF WORK:

- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [ ] Roofing
- [ ] Siding
- [ ] Fence _____ Height (exceeds 6')
- [ ] Sign _____ Sq. Ft.
- [ ] Pool
- [ ] Retaining Wall _____ Sq. Ft.
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)

$

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
No. of Stories
Height of Structure ft.
Area — Largest Floor sq. ft.
New Bldg. Area/All Floors sq. ft.
Volume of New Structure cu. ft.
Max. Live Load
Max. Occupancy Load

Constr. Class Present _____ Proposed _____

If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. $ 390 - Less —
2. Rehabilitation $
3. Total (1+ 2) $ 0

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

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

SHUT UP & EAT
OLD FRED BLVD

C43-003244 ##

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit # 13-2653+A
6-27-13

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 Qualification Code

Work Site Location 741 Brick Blvd
Brick NJ 08723

Owner In Fee Ruben Acosta

Address

Tel (732) 998-6933

Contractor JOHN KEIEIGH ELEC CONT

Address 1041 SALLY EKE RD
BRICK NJ 08724

Tel (732) 904-7036 FAX (N/A)

Contractor License No 4409

Federal Emp. No. [redacted]

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 2000.00

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

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

D. TECHNICAL SITE DATA

QTY	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Units	
		Alarm Devices/F.A.C.P. 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	
2	3 TON	KW Central A/C Unit	
4	1½	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	

COMMERCIAL

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[X] No Plans Required

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved

Date: 6-25-13
Approved by: DD (DUH)

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA

Date: 7-9-13
Approved by: JT

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			7/2/13	
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

P

PLUMBING SUBCODE
TECHNICAL SECTION

Update

Date Received / Control # 10/3/13

Date Issued / Permit # 13-2405-3+C

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 Qualification Code

Work Site Location 741 Brick Blvd Brick, NJ 08723

Owner in Fee: Shut up And Eat

Tel. (732) 998-6933 e-mail

Address 741 Brick Blvd Brick NJ 08723 (street, municipality, zip code)

Contractor: Bonifide Mechanical LLC Tel (732) 757-9138

Address 1037 Sheila Dr e-mail

Toms River NJ 08753

Contractor License No. NJ Plumb 12307 Exp. Date 7.15

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

Federal Emp. ID No. 26-3927471 FAX (732) 929-3025

B. PLUMBING CHARACTERISTICS

Use Group Present X Proposed

Building Sewer Size 4" Public Sewer Private Septic

Water Service Size 1 1/2" Public Water Private Well

Est. Cost of Plumbing Work $ 1000.00

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 sign/Contractor sign and seal here: Richard J Bonifacio

Print name here: Richard J Bonifacio

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Reinstall of plumbing fixtures

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
3	Sink - prep, mop, hand	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
2	Stacks STOPPER VENTS	
	Other	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[X] Plumbing Plans Approved

Date: 10-01-13 Approved by: AA

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 10-3-13

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [X] CA

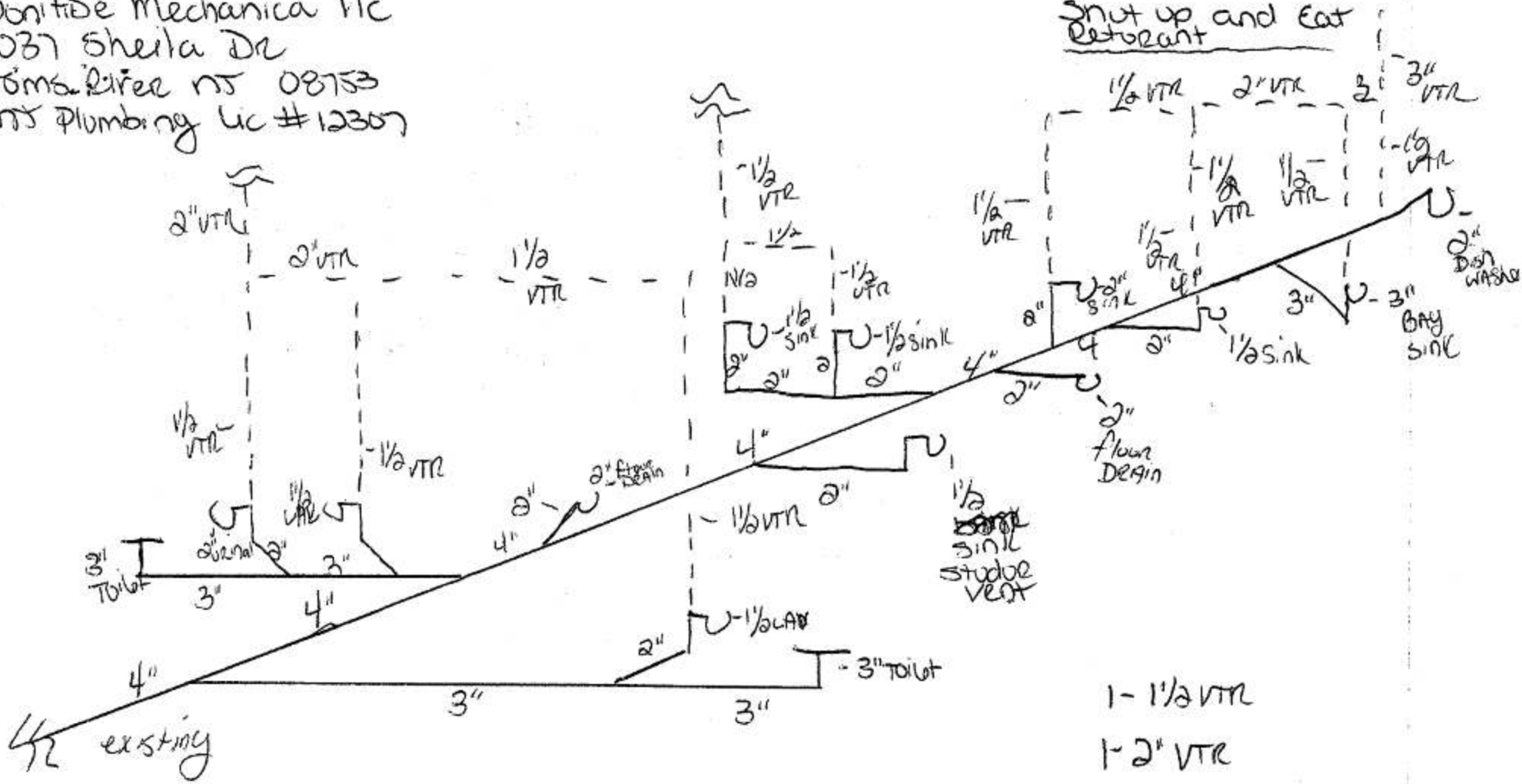
Date: 10-7-13

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			10-7-13	

Bonifide Mechanica llc
1037 Sheila Dr
Toms River NJ 08753
NJ Plumbing Lic #12307

Shut up and Eat Restorant



1- 1½ VTR
1- 2" VTR
1- 3" VTR

732-757-9138.

TOWNSHIP OF BRICK

	INITIAL	DATE
Building Subcode		
Plumbing Subcode		
Fire Subcode		
Electrical Subcode		
Plan Reviewer	pA	10-31-13
Plans Released		
Construction Official		

SHUT UP + EAT 732-PETER-477-7790 MGR.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 8/16/13

Date Issued / Permit # 13-2653+B

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

Block 1073 Lot 13 Qualification Code

Work Site Location 741 Brick Blvd Brick NJ 08723

Owner in Fee: Ruben ACosta/ Felix Maltalvo Lawyer

Tel. (973) 485-9395 e-mail

Address

Contractor CJ Mechanical (street, municipality) Tel. (908) 461 8897 (zip code)

Address 185 Liberty Bell Rd. e-mail

Toms River NJ 08750

Contractor License No. 13VH06242600 Exp. Date 12-31-13

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

Federal Emp. ID No. 45-1298551 FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 3000.00

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 sign/Contractor sign and seal here: Jal Baf

Print name here:

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
3	Fuel Oil Piping Install Appliance (3) $3000	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Administrative Surcharge	$
	Minimum Fee	$
	State Permit Surcharge Fee	$
	TOTAL FEE	$

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: 8-13-13 Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 8-13-13
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 10-7-13
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping	08/23/13		08/26/13 PA	
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			10-7-13	

LAURENCE NEWMAN B 1167
341-9900 X7416

0 PARTS
1-PREP SINK
1-HAND SINK
1-PREP SINK
1-CHANGE OF [illegible]

08-23-13 AA

① NO TEST ON GAS PIPING - COULDN'T INSPECT BEHIND FRYERS, ECT (IN USE)

② HAND SINK & PREP SINK IN KITCHEN NO TRAPS, CORRUGATED TAILPIECE, ETC → OK

③ GAS TIE IN (IN ATTIC) - 2 - BUSHINGS - NOT APPROVED HANGERS → OK

④ SLOP SINK NEW - INTO OPEN HUB, OK

⑤ TOILET ROOM VALVES H+W 155° OK → 08-27-13 PA

⑥ DISHWASHER NEEDS A DILUTION KIT 17C DISCHARGE TEMP

⑦ 2 COMPARTMENT SINK H+C REVERSED + CROSS CONNECTION WITH HAND SPRAYER

⑧ NEED PLUMBER PRESENT FOR NEXT INSPECTION

⑨ NEED TO INSPECT SINK IN COOKING AREA → OK 08-27-13 PA

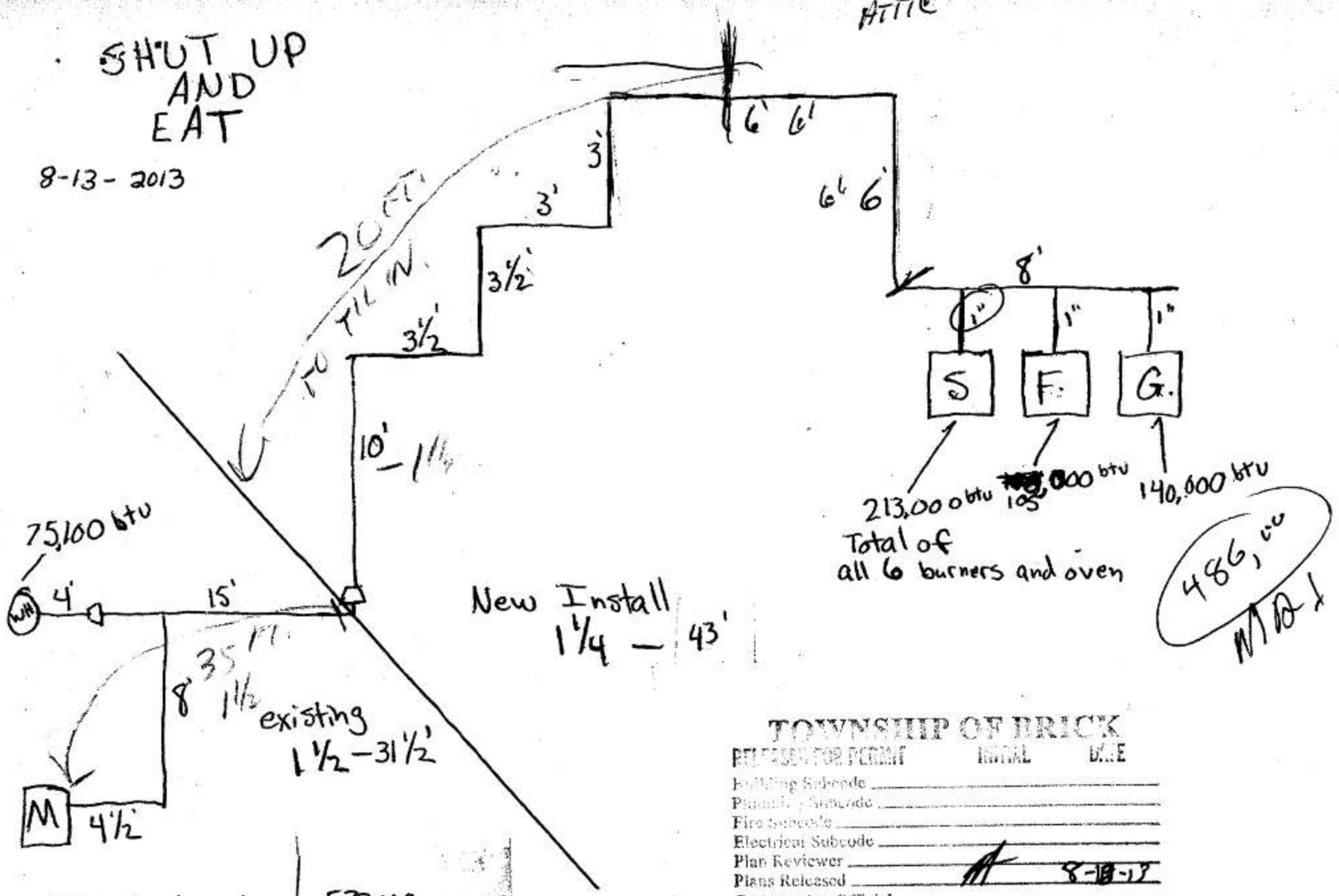
SINK IN FRONT OK COUNTER NOT SURE IF IT HAS A TRAP.

08-26-13 PA
C-J MECHANICAL AIR
① TESTED NEW GAS BACK THROUGH METER + REGULATOR, INFORMED THEM NOT TO TURN THE GAS BACK ON UNTIL THE GAS COMPANY COMES OUT AND MAKES A DECISION WHETHER TO CHANGE METER + REGULATOR
② NEW GAS TO FRYER, STOVE + GRILL ONLY IS OK
OK 08-27-13 PA NEW METER + REGULATOR

P tech +B

SHUT UP AND EAT

8-13-2013



TOWNSHIP OF BRICK

RELEASED FOR PERMIT INITIAL DATE

Building Subcode _____

Plumbing Subcode _____

Fire Subcode _____

Electrical Subcode _____

Plan Reviewer _____ 8-13-13

Plans Released _____

Construction Official _____

Total Load – 533,100.

Total Length – ~~74½'~~ 70'

TCO issued 7/26/13

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 6-21-13
Control # 13-2653
Date Issued
Permit #

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 Qualification Code
Work Site Location 741 Brick Blvd
Brick NJ 08723
Owner in Fee: Ruben Acosta
Tel. (732) 998-6933 e-mail
Address
Contractor (street) Gately Mechanical (municipality) Inc Tel. 732 9048556 (zip code)
Address 238 Dixon Ave e-mail
Long Branch NJ
Contractor License No. BI9510 Exp. Date 6-30-13
Home Improvement Contractor Registration No. or Exemption Reason (if applicable):
Federal Emp. ID No. 223685555 FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size Public Sewer Private Septic
Water Service Size Public Water Private Well
Est. Cost of Plumbing Work $ 7,000

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 sign/Contractor sign and seal here:
Print name here: Andrew W Gately
[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Install 2 Fujitsu Electric Heat Pumps

COMMERCIAL

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
40'	Other CONDENSATE 3/4"	

2-3 TON

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $
TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: 6-26-13 Approved by: PA
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 6-20-13
Approved by: JJ

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 07-01-13
Approved by: PA

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			06-28-13	PA

U.C.C. F130 (rev. 11/09) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

C-13-003244 tA

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Control # 13-2653 tA

Date Issued
Permit # 6-27-13

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 Qualification Code

Work Site Location 741 Brick Blvd.
Brick, NJ 08723

Owner in Fee: ~~Shut Up Feet 2~~ Ruben Acosta.

Tel. (732) 998-6933 e-mail

Address 741 Brick Blvd. Brick NJ 08723
(street) (municipality) (zip code)

Contractor: Freedom Fire Safety Tel. (877) 351-3473

Address 218 B Grant Ave e-mail freedomfire@comcast.net
Pine Beach, NJ 08741

Fire Protection Equipment, NJ Div of Fire Safety Permit No. P01280

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. Exp. Date

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

Federal Emp. ID No. 271-136-663 FAX: ( )

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [x] Gas [ ] Oil [ ] Electric [ ] Solar Other

Location:

Total Cost of Fire Protection Work $ 1000

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [x] Existing
Location of Panel:

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

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: Timothy Poppe

[x] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: add two Nozzles to Existing Ih 320 Kitchen Suppression System

Water Supply Source

Method of Alarm/Suppression System Supervision

COMMERCIAL

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobe, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump GPM Type		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical existing	1	
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other		
		Administrative Surcharge $
		Minimum Fee $
		State Permit Surcharge Fee $
		TOTAL FEE $

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date Approved by:
[x] Fire Protection Plans Approved
Date 6/26/13 Approved by: KW
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 6-27-13
Approved by: KEP

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CSO [ ] CA
Date: 10/11/13
Approved by: KEP

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System			7/2/13	mb
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical	7/2/13			KW
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final	7/2/13		10/10/13 Revised	
Other				

U.C.C. F140 (rev. 02/13) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

A-2

1st

Lynn Cirok

(973)-901-4066 (c)

Gail Linares

(201)-532-9605

(F) tech +A

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received / Control # 8/16/13

Date Issued / Permit # 13-2653 + B

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 Qualification Code

Work Site Location 741 Brick Blvd Brick NJ. 08723

Owner in Fee: Ruben Acosta / Felix Moltalvo Lawyer

Tel. (973) 485-9395 e-mail

Address

Contractor: C-5 (street) Mechanical (municipality) Tel. (908) 461-8897 (zip code)

Address 185 Liberty Bell Rd. e-mail

Toms River NJ 08750

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. Exp. Date

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

Federal Emp. ID No. 45-1298551 FAX: ( )

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar

Other

Location:

Total Cost of Fire Protection Work $ 300.00

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible

Capacity

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel:

Fire Suppression/Standpipe System:

[ ] New OR [ ] Existing

Location of Main Control Valve:

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[✓] Fire Protection Plans Approved

Date: 8/15/13 Approved by: [illegible]

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 8/15/13

Approved by: [illegible]

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final			8/19/13	
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.

Applicant/Contractor sign here: Joel Baf

Print name here:

D. TECHNICAL SITE DATA [ ] Certified Contractor [ ] Exempt Applicant

DESCRIPTION OF WORK:

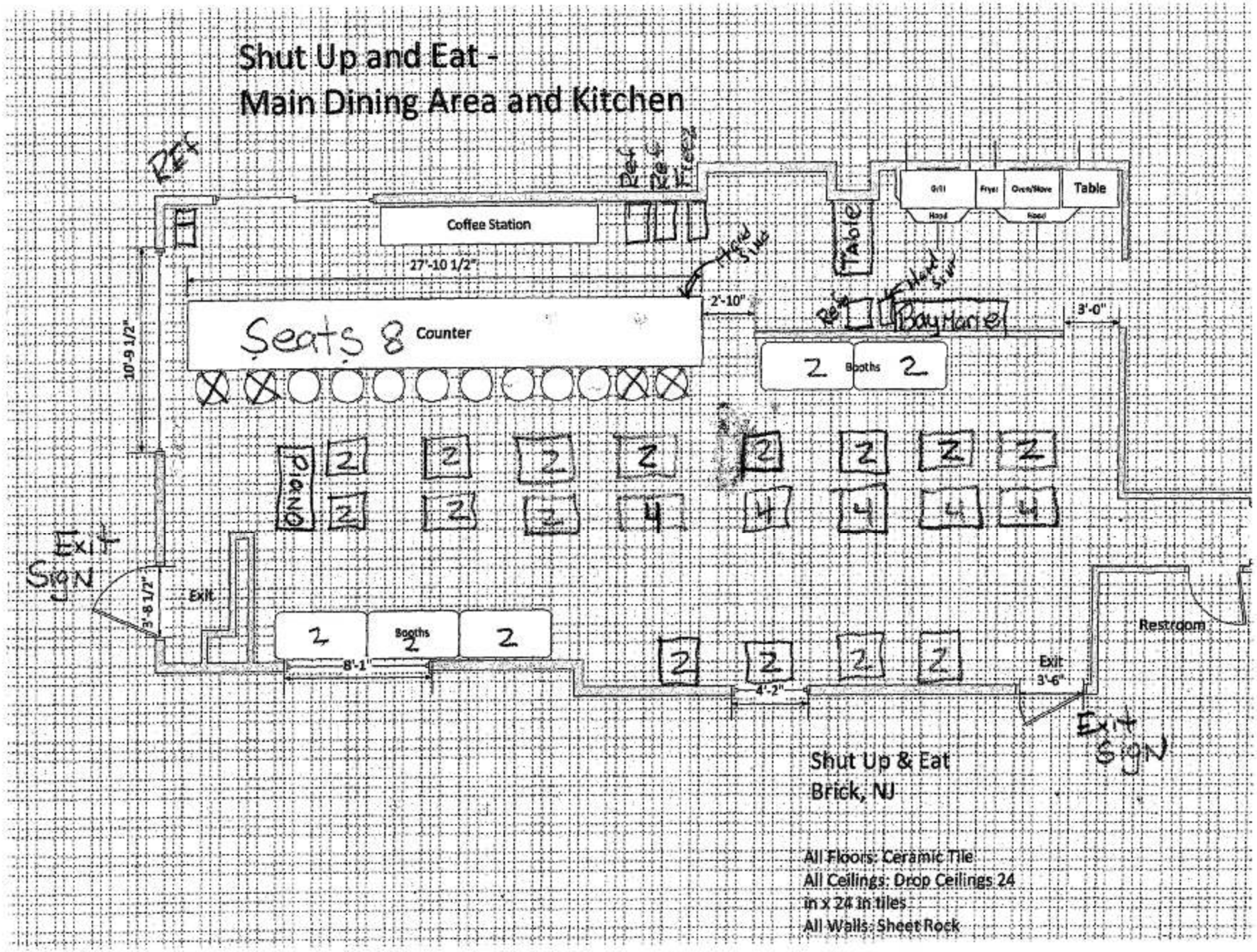
Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump GPM Type		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		above
Fuel-Fired Appliances [✓] Gas [ ] Oil [ ] Solid	3	Exempt.
Fireplace Venting/Metal Chimney		
Other		
		Administrative Surcharge $
		Minimum Fee $
		State Permit Surcharge Fee $
		TOTAL FEE $

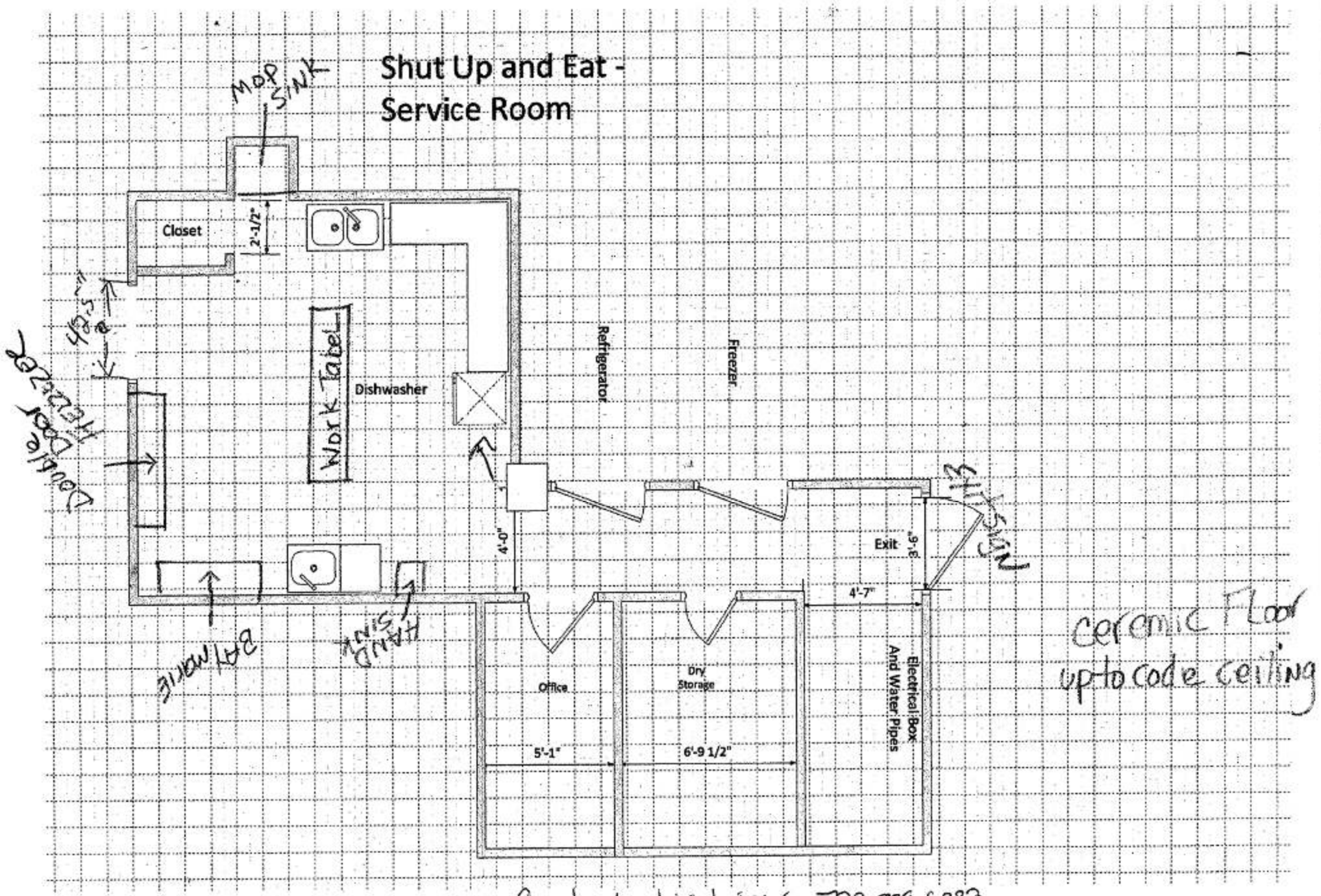
MH1 Brick Blvd.
Brick NJ

Correct Drawing
Revision



741 Brick Blvd.
Brick N.J

Correct Drawing



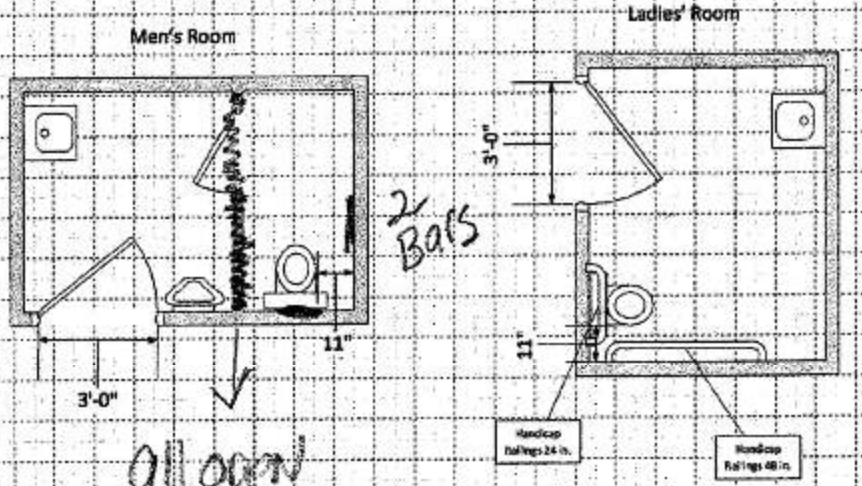
ceramic Floor
up to code ceiling

Contact Luis Linares 732 998-6933

741 Brick Blvd
Brick N.J

Correct Drawing

Shut Up and Eat - Restrooms



2 Bars

all open restroom

Both ~~Handicaped~~

Contact Luis Linares 732-998-6933

APPLICATION FOR CERTIFICATE

Date Received	6/6/2013
Date Permit Issued	6/21/2013
Control #	C-13-003244
Permit #	13-2653
Date Issued	7/5/2013

IDENTIFICATION

Block 673 Lot 13 Qualifier

Work Site Location 741 BRICK BLVD. Brick Township, NJ

Owner in Fee 226 MARKET REALTY LLC ATTN:R ACOSTA
15 EAST KINNEY ST NEWARK NJ 07102

Telephone (973) 485-9395

Contractor G & J Eats LLC
Address 164 Ashland Ave. Brick NJ 08723

Telephone (732) 998-6933
Lic. No. or Bldrs. Reg. No.
Federal Employee. No. 973 645-6042 (Juan gave number)

ACTION

- ☐ CERTIFICATE OF OCCUPANCY
- ☐ CERTIFICATE OF CONTINUED OCCUPANCY
- ☐ LEAD HAZARD ABATEMENT CERTIFICATE OF CLEARANCE
- ☑ TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP Previous M Current

FINAL COST OF CONSTRUCTION: $ 7390
(Include value of any new structure, all on-site improvements, built-in furnishings and fixtures and all the integral equipment exclusive of process or manufacturing equipment.)

A set of "As Built" or amended drawings is required if the building or structure deviates from the approved plans filed with the construction permit. Use space below to describe any deviations from approved plans:

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

DESCRIPTION OF WORK/USE:
Alteration TENANT FIT UP

I hereby attest, that to the best of my knowledge, all work has been completed in accordance with the approved plans, permit, and regulations. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED: Luis Z Linares
Owner/Agent

- ☐ OWNER
- ☐ AGENT

Pre-Engineered Restaurant Fire suppression System Report

FREEDOM FIRE & SAFETY EQUIPMENT
P.O. Box 512 Pine Beach, NJ 08741
Phone: 877-351-3473 NJ Fire Permit #P01280

Customer

Name: Shut Up + Eat
Address: 741 Brick Blvd.
City: Brick State: NJ Zip: 08723
Telephone: 732-477-7790 Store No.
Owner/Manager: G+J Eats LLC

Date of Service: 7-1-13			Time: AM / PM	
Annual	Semi-Annual X	Recharge	Installation	Renovation
Location of System Cylinders: Right of Hood				UL 300 X Yes ☐ No
Manufacturer: ☐ Amerex ☐ Ansul ☐ Kidde ☐ Pro Tex II ☐ Pyro chem ☐ Range Guard ☐ Other				Chemical: X Wet ☐ Dry
Model Number(s): KP375				
Cylinder Size Master: 3.75 gallon	Cylinder Slave Size	Cylinder Slave Size		
Serial Number(s): [redacted]				
Fusible Links 360°: —	Fusible Links 450°: 4	Fusible Links 500°: —	Other: —	
Fuel Shut-Off: X Electric X Gas X Both				
Electric – (Mechanical): Gas Shut-Off Valve(s): Right of Hood			Gas Size(s): 1 1/4"	
Hydrostatic Test Date: 2005				

Cooking Appliance Locations: **Hood Size(s):** 10'-0" **Duct(s)** 1 **Size(s)**

60" Grill, Fryer, 6 Burner Range

1. All appliances properly covered w/correct nozzles	(Yes)	No	NA	16. Proper nozzle covers in place	(Yes) No NA
2. Duct & plenum covered w/ correct nozzles	(Yes)	No	NA	17. Check fuse links & clean	Yes (No) NA
3. Check positioning of all nozzles	(Yes)	No	NA	If no, replaced	(Yes) No NA
4. System installed according to MFG UL listing	(Yes)	No	NA	18. Check travel of cable nuts/S-hooks	(Yes) No NA
5. Hood/duct penetrations sealed w/weld or UL device	(Yes)	No	NA	19. Piping & conduit securely bracketed	(Yes) No NA
6. Check if seals are intact	(Yes)	No	NA	20. Proper separation between fryers & flame	(Yes) No NA
Evidence of tampering	Yes	(No)	NA	21. Proper clearance from flame to filters	(Yes) No NA
7. Has system been discharged	Yes	(No)	NA	22. Exhaust fan in operating order	(Yes) No NA
8. Pressure gauge in proper range	(Yes)	No	NA	23. All filters in place	(Yes) No NA
9 Check cartridge weight/gauge	(Yes)	No	NA	24. Fuel shut-off in "ON" position	(Yes) No NA
10. Inspect cylinder & mount	(Yes)	No	NA	25. Manual & remote set/seals in place	(Yes) No NA
11. Operate system from terminal link	(Yes)	No	NA	26. Replace system covers	(Yes) No NA
12. Test for proper operation from remote	(Yes)	No	NA	27. System operational & seals in place	(Yes) No NA
Location: Below				28. Slave system operational	Yes No (NA)
13. Check operation of micro-switch	(Yes)	No	NA	29. Clean cylinder & mount	(Yes) No NA
Devices: (MUA) Horn/Strobe (Alarm)				30. Fan warning sign on hood	(Yes) No NA
(Electric shut off) Other				31. Personnel instructed in manual operation of system	(Yes) No NA
14. Check operation of gas valve	(Yes)	No	NA	32. Proper hand portable extinguishers	(Yes) No NA
Location:				33. Portable extinguishers properly serviced	(Yes) No NA
15. Clean nozzles	(Yes)	No	NA	34. Service & certificate tag on system	(Yes) No NA

Comments/Discrepancies:

On this date, this pre-engineered fire suppression system was inspected & operationally tested in accordance with the fire suppression system requirements of NFPA 17 or 17A, 96 & the manufacturer's manual with the results indicated above.

X Service Technician	Date	Time	X Customer's Authorized Signature
[signature]	7/1/13	AM / PM	[signature]

The above service technician certifies that the above system was personally inspected & found conditions to be as indicated on this report

WHITE – CUSTOMER COPY **CANARY** – DISTRIBUTOR **PINK** – AUTHORITY HAVING JURISDICTION

INSPECTION AND TESTING FORM

DATE: 6/28/13

TIME: 18:30

SERVICE ORGANIZATION

Name: Planer Protective

Address: Po Box 321 Beachwood NJ

Representative: John Planer

License No.: 34FA00117400

Telephone: 732-255-0128

PROPERTY NAME (USER)

Name: Shut Up and Eat

Address: 741 Brick Blvd Brick NJ

Owner Contact: Lou

Telephone: 732-477-7791

MONITORING ENTITY

Contact: RRMS

Telephone: 800-932-3822

Monitoring Account Ref. No.: 252-5747

APPROVING AGENCY

Contact:

Telephone:

TYPE TRANSMISSION

- ☐ McCulloh
- ☐ Multiplex
- ☒ Digital
- ☐ Reverse Priority
- ☐ RF
- ☐ Other (Specify)

SERVICE

- ☐ Weekly
- ☐ Monthly
- ☐ Quarterly
- ☐ Semiannually
- ☒ Annually
- ☐ Other (Specify)

Control Unit Manufacturer: Firelite

Model No.: MS5UD - 3

Circuit Styles: B

Number of Circuits: 3

Software Rev.: 2.2 B2

Last Date System Had Any Service Performed: 6-28-13

Last Date that Any Software or Configuration Was Revised:

ALARM-INITIATING DEVICES AND CIRCUIT INFORMATION

Quantity	Circuit Style	
3	4	Manual Fire Alarm Boxes
		Ion Detectors
2	4	Photo Detectors
		Duct Detectors
2	4	Heat Detectors
		Waterflow Switches
1	4	Supervisory Switches
		Other (Specify):

ALARM NOTIFICATION APPLIANCES AND CIRCUIT INFORMATION

Quantity	Circuit Style	
		Bells
		Horns
		Chimes
2	Y	Strobes
2	Y	Speakers
		Other (Specify): Horn/strobes

No. of alarm notification appliance circuits: _____

Are circuits monitored for integrity? ☐ Yes ☐ No

SUPERVISORY SIGNAL-INITIATING DEVICES AND CIRCUIT INFORMATION

Quantity	Circuit Style	
		Building Temp.
		Site Water Temp.
		Site Water Level
		Fire Pump Power
		Fire Pump Running
		Fire Pump Auto Position
N/A		Fire Pump or Pump Controller Trouble
		Fire Pump Running
		Generator In Auto Position
		Generator or Controller Trouble
		Switch Transfer
		Generator Engine Running
		Other:

SIGNALING LINE CIRCUITS

Quantity and style (See NFPA 72, Table 3-6) of signaling line circuits connected to system:

Quantity 1 Style(s) 4

SYSTEM POWER SUPPLIES

a. Primary (Main): Nominal Voltage 115vac, Amps 3.0

Overcurrent Protection: Type Breaker 2-pole, Amps 20

Location (of Primary Supply Panelboard): in FACP/elec room

Disconnecting Means Location: same

b. Secondary (Standby): SLA Storage Battery: Amp-Hr. Rating 14

Calculated capacity to operate system, in hours: _____ X _____ 24 _____ 60 _____

_____ Engine-driven generator dedicated to fire alarm system:

Location of fuel storage: _____

TYPE BATTERY

- ☐ Dry Cell
- ☐ Nickel-Cadmium
- ☐ Sealed Lead-Acid
- ☒ Lead-Acid
- ☐ Other (Specify): _____

c. Emergency or standby system used as a backup to primary power supply, instead of using a secondary power supply:

_____ Emergency system described in NFPA 70, Article 700

_____ Legally required standby described in NFPA 70, Article 701

_____ Optional standby system described in NFPA 70, Article 702, which also meets the performance requirements of Article 700 or 701.

PRIOR TO ANY TESTING

NOTIFICATIONS ARE MADE	Yes	No	Who	Time
Monitoring Entity	☒	☐	RRMS	1830
Building Occupants	☒	☐	All	1830
Building Management	☒	☐	All	1830
Other (Specify)	☐	☐		
AHJ (Notified) of Any Impairments	☐	☐		

SYSTEM TESTS AND INSPECTIONS

TYPE	Visible	Functional	Comments
Control Unit	☒	☒	
Interface Eq.	☐	☐	
Lamps/LEDS	☒	☒	
Fuses	☒	☒	
Primary Power Supply	☒	☒	
Trouble Signals	☒	☒	
Disconnect Switches	☒	☐	
Ground-Fault Monitoring	☐	☒	

SECONDARY POWER

TYPE	Visible	Functional	Comments
Battery Condition	☒		new 6-13
Load Voltage		☒	
Discharge Test		☐	
Charger Test		☒	
Specific Gravity		☐	
TRANSIENT SUPPRESSORS	☐		
REMOTE ANNUNCIATORS	☒	☒	
NOTIFICATION APPLIANCES			
Audible	☒	☒	
Visual	☒	☒	
Speakers	☐	☐	
Voice Clarity		☐	

INITIATING AND SUPERVISORY DEVICE TESTS AND INSPECTIONS

Loc. & S/N	Device Type	Visual Check	Functional Test	Factory Setting	Meas. Setting	Pass	Fail
dining (2)	pull sta	☒	☒			☒	☐
Kitchen	pull sta	☒	☒			☒	☐
~~dining (2)~~	~~smoke~~	☒	☒	2.4 to 2.8	2.4, 2.6	☒	☐
		☒	☐			☐	☐
attic	heat	☐	☐			☐	☐
		☐	☐			☐	☐

Comments: _____

EMERGENCY COMMUNICATIONS EQUIPMENT		Visual	Functional	Comments
Phone Set		☐	☐	
Phone Jacks		☐	☐	
Off-Hook Indicator		☐	☐	
Amplifier(s)	N/A	☐	☐	
Tone Generator(s)		☐	☐	
Call-in Signal		☐	☐	
System Performance		☐	☐	

INTERFACE EQUIPMENT		Visual	Device Operation	Simulated Operation
(Specify) _____		☐	☐	☐
(Specify) _____		☐	☐	☐
(Specify) _____		☐	☐	☐
SPECIAL HAZARD SYSTEMS				
(Specify) _____	N/A	☐	☐	☐
(Specify) _____		☐	☐	☐
(Specify) _____		☐	☐	☐

Special Procedures: _____

Comments: _____

SUPERVISING STATION MONITORING	Yes	No	Time	Comments
Alarm Signal	☒	☐	1850	
Alarm Restoration	☒	☐	"	
Trouble Signal	☒	☐	"	
Supervisory Signal	☒	☐	"	
Supervisory Restoration	☒	☐	"	

NOTIFICATIONS THAT TESTING IS COMPLETE	Yes	No	Who	Time
Building Management	☒	☐	all	
Monitoring Agency	☒	☐	RRMS	
Building Occupants	☒	☐	all	
Other (Specify)	☐	☐		

The following did not operate correctly: _____

System restored to normal operation: Date: 6-28-13 Time: 1850

THIS TESTING WAS PERFORMED IN ACCORDANCE WITH APPLICABLE NFPA STANDARDS.

Name of Inspector: John Planer Date: 6-28-13 Time: 1850

Signature: John Planer

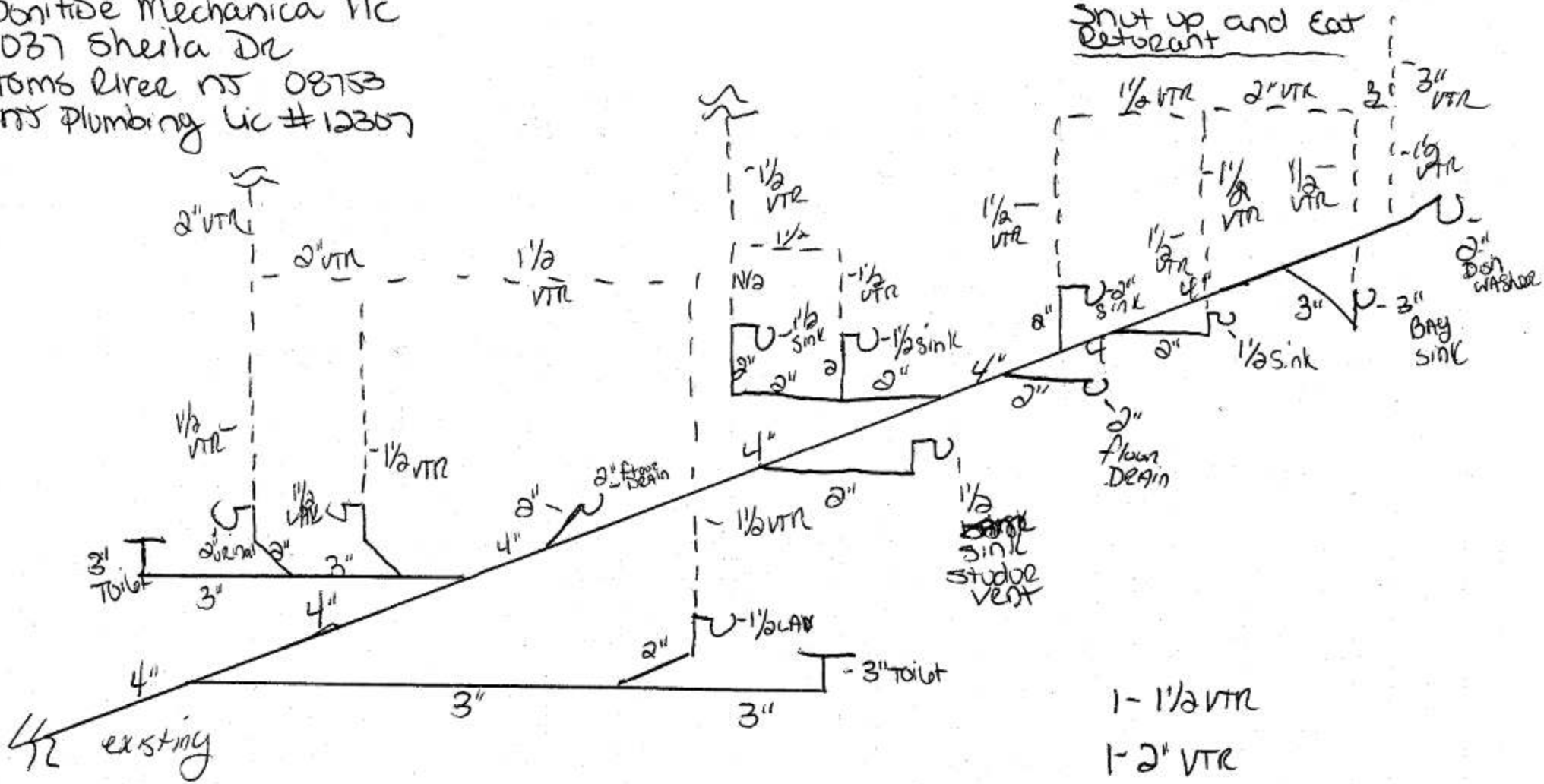
Name of Owner or Representative: _____

Date: _____ Time: _____

Signature: _____

Bonifide Mechanica llc
1037 Sheila Dr
Toms River NJ 08753
NJ Plumbing Lic #12307

Shut up and Eat Restaurant



1- 1½ VTR
1- 2" VTR
1- 3" VTR

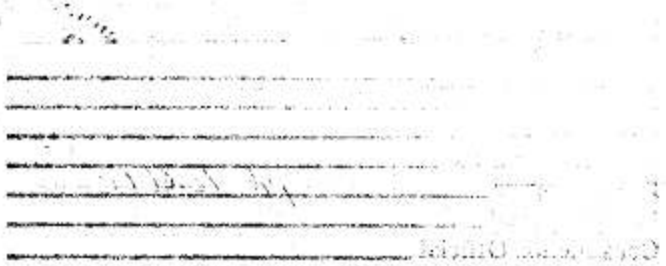
732-757-9138

TOWNSHIP OF BRICK
BUILDING PERMIT INITIAL
Building Subcode
Plumbing Subcode
Fire Subcode
Electrical Subcode
Plan Reviewer pt 10-8-12
Plans Released
Construction Official

D 673
L 13

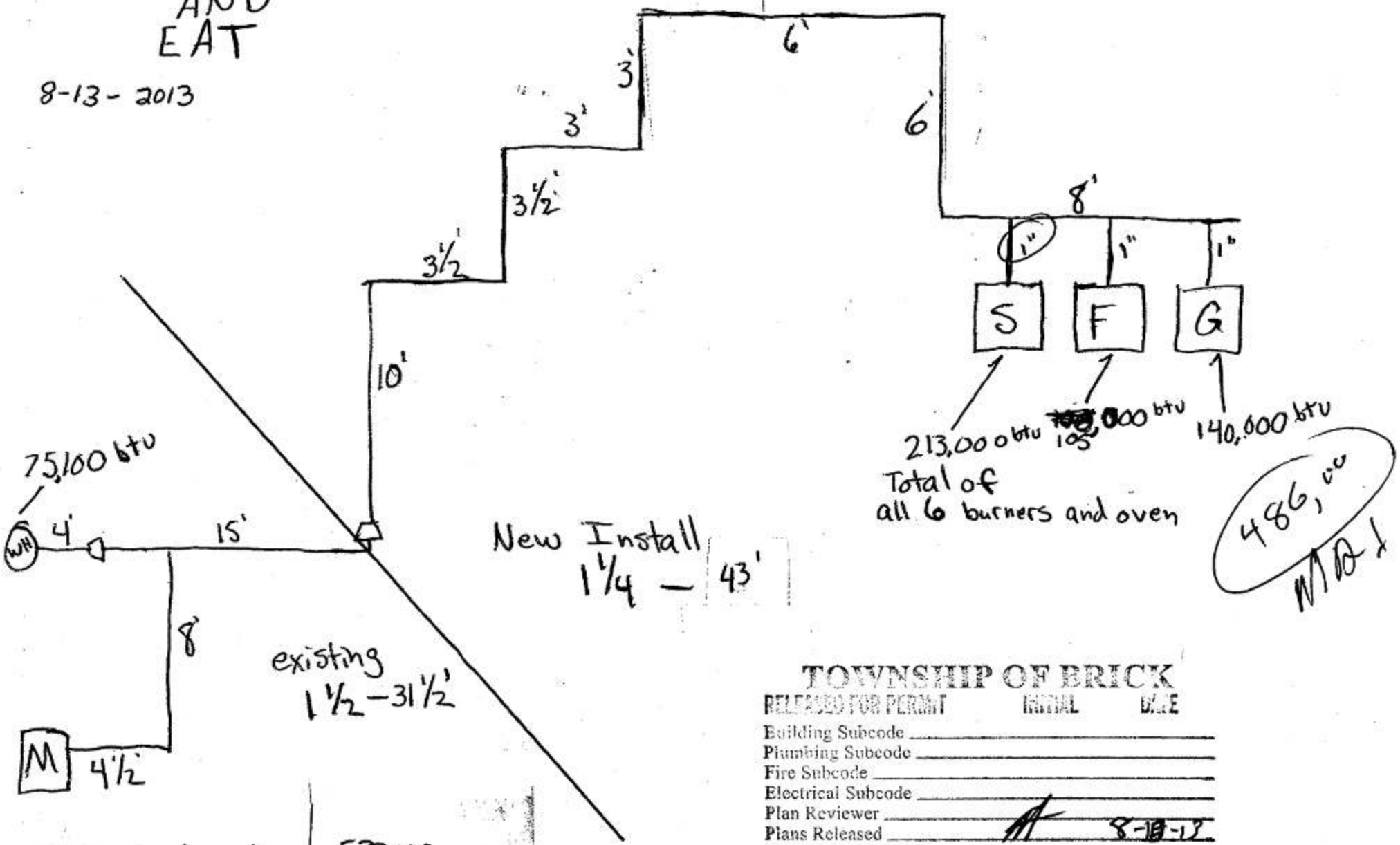
Permit # 13.2653

741 Brick Blvd
Brick NJ 08723



SHUT UP
AND
EAT

8-13-2013



Total Load — 533,100.

Total Length — ~~74½'~~ 701

TOWNSHIP OF BRICK

RELEASED FOR PERMIT INITIAL DATE

Building Subcode _____

Plumbing Subcode _____

Fire Subcode _____

Electrical Subcode _____

Plan Reviewer _____

Plans Released _____ 8-19-13

Construction Official _____

7/27 732-998-7492

7/29 480-393-5998

F

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Tuesday, July 23, 2013

To: 226 MARKET REALTY LLC
ATTN:R.ACOSTA
15 EAST KINNEY ST
NEWARK, NJ 07102

RE: Plumbing Subcode
Block: 673 Lot: 13 Qual:
741 BRICK BLVD.
Permit Number: 13-2653+B Control Number: C-13-003898
Last Submit Date: Friday, July 12, 2013

Dear 226 MARKET REALTY LLC ATTN:R.ACOSTA,

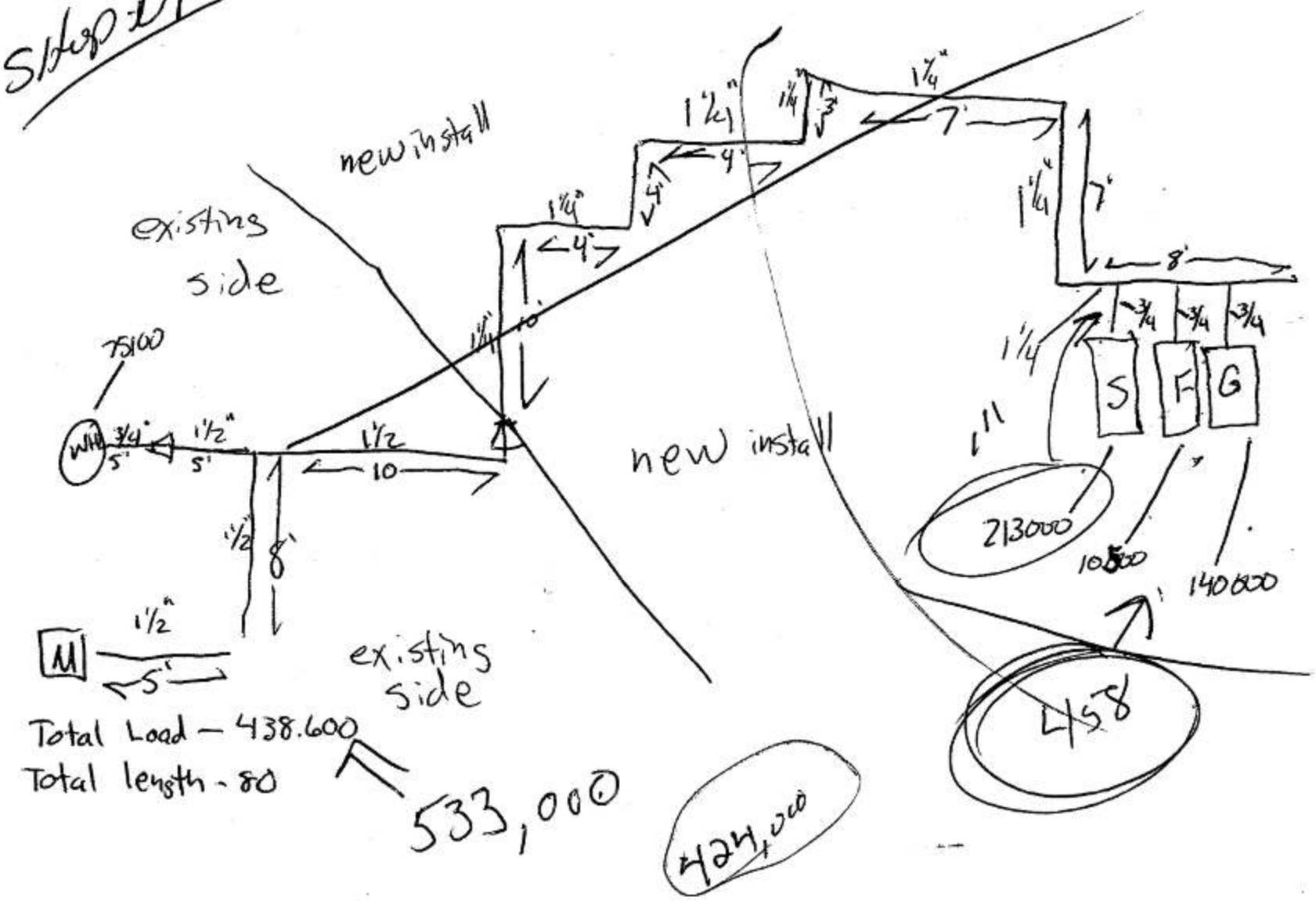
Your request is hereby denied based upon the following infractions.1- 80' chart 11/4 undersized as per table 402.4[2], maxi is 458,000 btus, and 1" outlet required on range[213,000]

Sincerely,

Mark Hibbard, [redacted]

CC:

Step up + 208



Total Load – 438.600
Total length - 80

≤ 533,000

** Transmit Confirmation Report **

P.1
TWP OF BRICK - FINANCE Fax:732-262-3048

Jul 29 2013 11:50am

Name/Fax No.	Mode	Start	Time	Page	Result	Note
14803935998	Normal	29,11:50am	0'25"	1	O K	

Faxed 7/29/13 -LH-

7/27 732-998-749[illegible]
7/29 480-393-59[illegible]

F

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Tuesday, July 23, 2013

To: 226 MARKET REALTY LLC
ATTN:R.ACOSTA
15 EAST KINNEY ST
NEWARK, NJ 07102

RE: Plumbing Subcode
Block: 673 Lot: 13 Qual:
741 BRICK BLVD.
Permit Number: 13-2853+B Control Number: C-13-003898
Last Submit Date: Friday, July 12, 2013

Dear 226 MARKET REALTY LLC ATTN:R.ACOSTA,

Your request is hereby denied based upon the following infractions.1- 80' chart 11/4 undersized as per table 402.4[2], maxi is 458,000 btua, and 1" outlet required on range[213,000]

Sincerely,

Mark Hibbard[redacted]

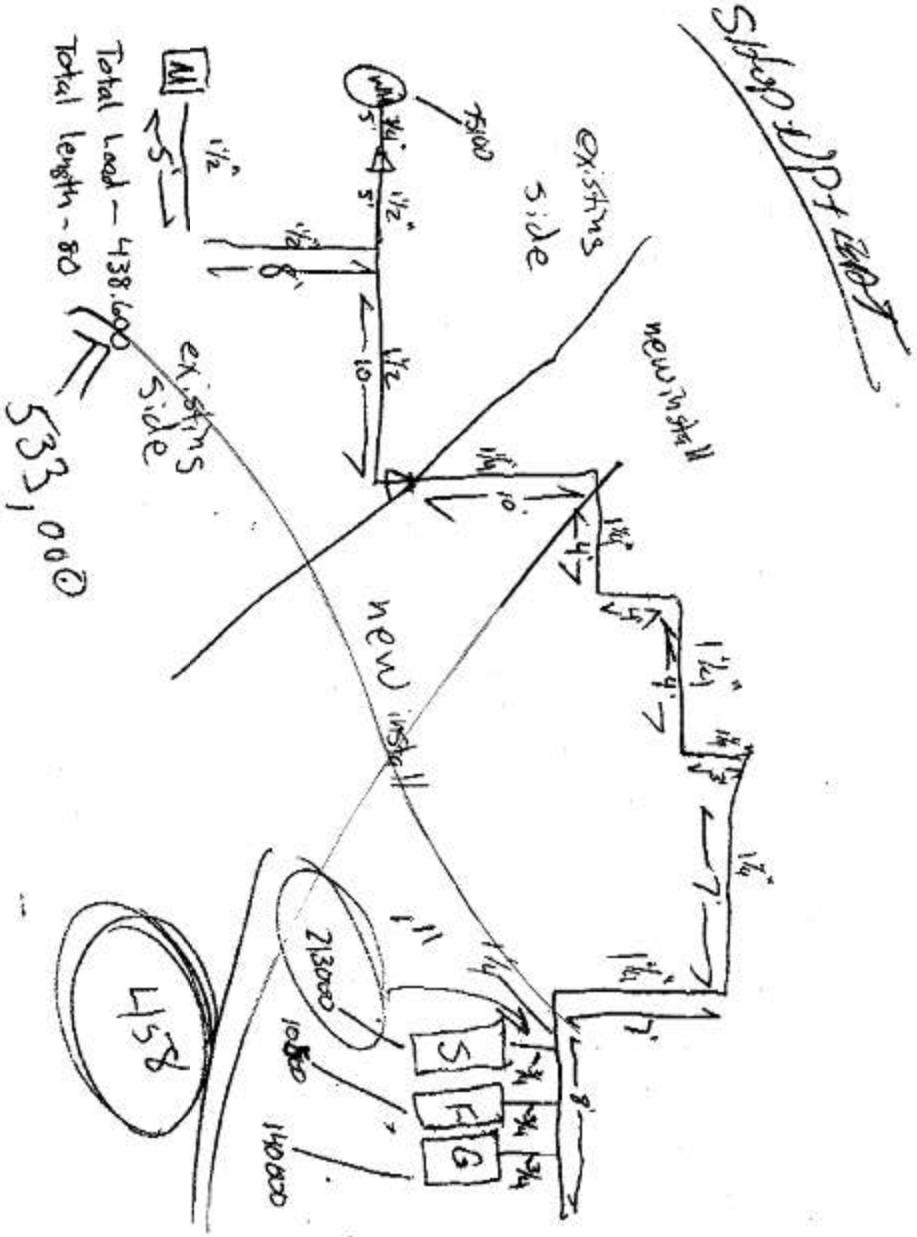
CC:

** Transmit Confirmation Report **

P.1
TWP OF BRICK - FINANCE Fax:732-262-3048

Aug 5 2013 11:59am

Name/Fax No.	Mode	Start	Time	Page	Result	Note
14803935998	Normal	05,11:58am	0'25"	1	O K	



OCEAN COUNTY HEALTH DEPARTMENT
SANITARY INSPECTION REPORT

Shut Up And Eat
Name of Establishment

Address

SATISFACTORY

DETAIL SUPPORTING DATA SHEETS ARE AVAILABLE UPON REQUEST
ON THESE PREMISES OR AT THE **OCEAN COUNTY HEALTH DEPARTMENT.**

Ocean County Health Department

Environmental Health Services
175 Sunset Ave.
PO Box 2191
Toms River, NJ 08754
(732) 341-9700 Ext. 7416
Fax - (732) 286-1495
www.ochd.org

Public Health
Prevent. Promote. Protect

Inspector's Signature

Lawrence A. Newmen
Inspector's Name

B-1762
Inspector's Permanent Registration Number

Date: 7-3-13

NOTE: In accordance with New Jersey State Sanitary Code.

H.D. 164

673/13

To: Fire Inspector Richard Orlando

Date: 6/26/2013

Re: 741 Brick Blvd
Brick NJ 08723
G & J Eats LLC
DBA- Shut Up and Eat#2

Permit Number +A Control Number C-13-003244+A

As per our conversation this morning please accept this as confirmation that we are using the existing Fire Alarm system and that the fire suppression system is connected to the fire alarm.

Planner Protective Services will certify our alarm system

Freedom Fire and Safety is the company doing the fire suppression system.

If you have any other questions, or if I need to supply you with any other documentation please feel free to call me at any time.

Thank you for your attention to this matter.

Luis M Linares
Project Manager for G& J Eats LLC

Rick spoke to Contractor - 6/26/13

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Monday, June 24, 2013

Resubmit 6/26/13

To: 226 MARKET REALTY LLC
ATTN:R.ACOSTA
15 EAST KINNEY ST
NEWARK, NJ 07102

RE: Fire Subcode
Block: 673 Lot: 13 Qual:
741 BRICK BLVD.
Permit Number: +A Control Number: C-13-003244+A
Last Submit Date: Friday, June 21, 2013

Dear 226 MARKET REALTY LLC ATTN:R.ACOSTA,

Your request is hereby denied based upon the following infractions.

Building has existing fire alarm. Will need certification from fire alarm contractor that system is fully functional.

Kitchen fire suppression system shall be connected to fire alarm system.

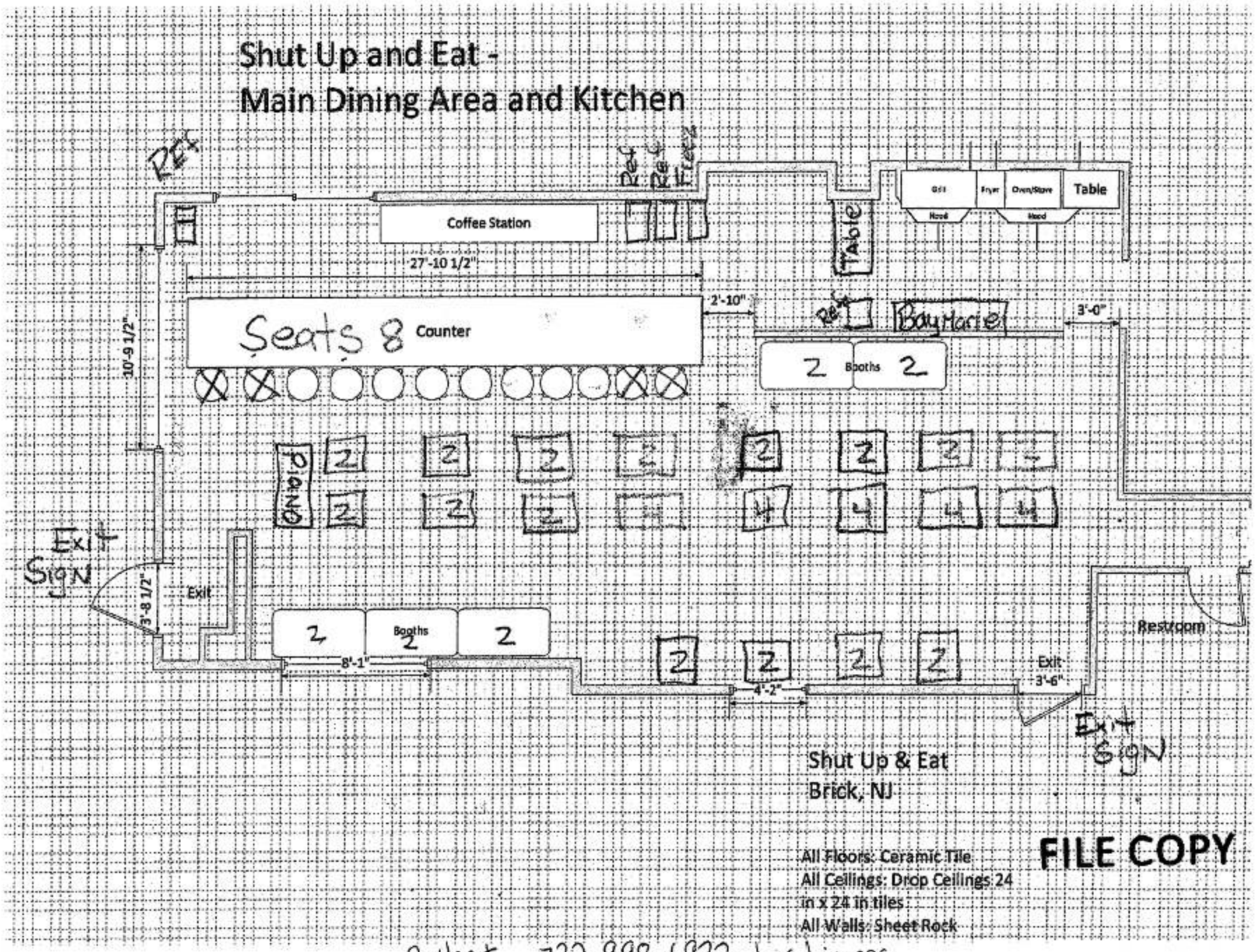
Letter confirming above is acceptable as long as no changes to the existing fire alarm or plan to be submitted

Sincerely,

Richard Orlando, Subcode Official

CC:

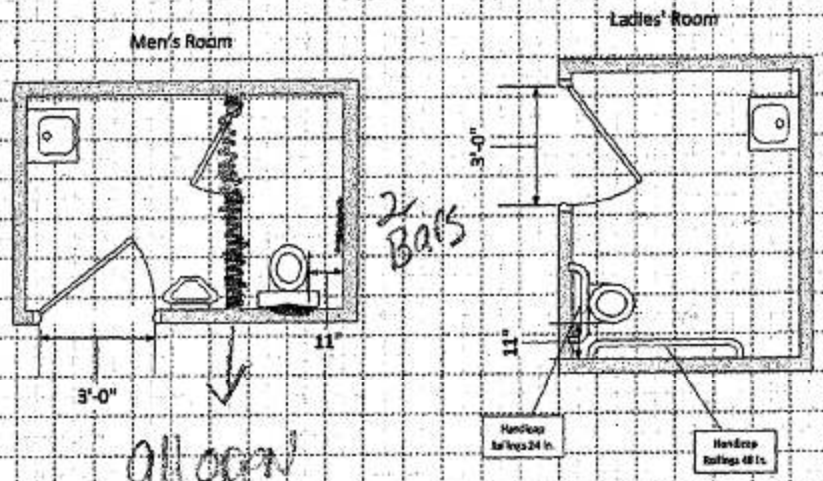
Shut Up and Eat -
Main Dining Area and Kitchen



FILE COPY

Contact 732-998-6933 Luis Linares

Shut Up and Eat - Restrooms

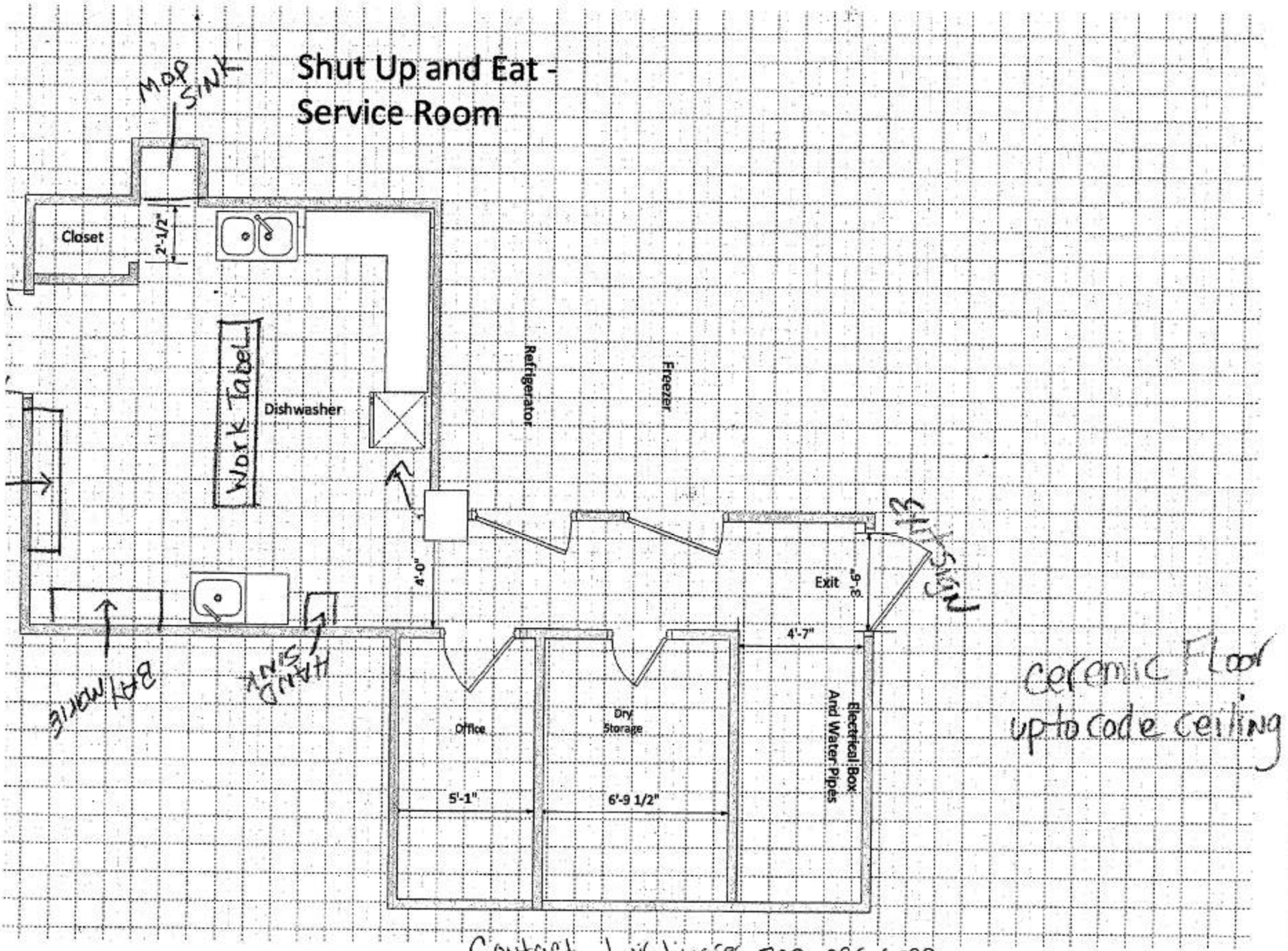


all open (rest room)

Both Handicaped

FILE COPY

Contact Luis Linares · 732-998-6932


Shut Up and Eat -
Service Room
Mop Sink
Closet
2'-1/2"
Work Table
Dishwasher
Refrigerator
Freezer
4'-0"
Exit
3'-6"
4'-7"
Office
Dry Storage
Electrical Box And Water Pipes
5'-1"
6'-9 1/2"
ceramic floor
up to code ceiling
Contact Luis Linares 732-998-6933

RECEIVING CLERK
DATE REC'D 6-12-13

ZONING PERMIT APPLICATION

PERMIT # ZP-13-00631
DATE ISSUED 6-21-13

BLOCK: 673 LOT: 13 QUALIFIER: — SITE ADDRESS: 741 Brick Blvd. Brick N.J 08723

IDENTIFICATION:

1. NAME OF OWNER IN FEE: Ruben Acosta./Felix Mollaluo Laura.
COMPLETE ADDRESS: MT Prospect Ave Newark NJ 07004.
PHONE # 973 485-9395 EMAIL:

2. NAME OF APPLICANT: G&J Eats LLC.
APPLICANT ADDRESS: 97 Princeton Ave. Brick NJ.
PHONE # EMAIL:

3. RESPONSIBLE PERSON FOR WORK: Luis Linares
PHONE# 732-998-6933 FAX#

4. SIGNATURE OF APPLICANT: Luis Linares

FOR OFFICE USE ONLY

FEE SUMMARY:

APPLICATION FEE: $ 50.00
OTHER: $
TOTAL: $

REQUIRED BY APPLICANT

RESIDENTIAL: —
COMMERCIAL: ✓
EXISTING USE: Restaurant
PROPOSED USE: Restaurant

BOARD APPROVAL: — PB — ZB
RESOLUTION#:
APPROVAL DATE:

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)
*NEW BUILDING: *ADDITION *ALTERATION ✓ *PORCH *DECK

POOL: ABOVE GROUND IN GROUND FENCE: HEIGHT TYPE MATERIAL

HEIGHT: (*IF APPLICABLE)

OTHER Changing from Friendly to Shut up and Eat.

DESCRIPTION: NO Change to Site

ZONING REVIEW:
DATE REVIEWED: 6/12/13 DATE DENIED: 6/12/13 DATE APPROVED: INTLS: SFS

(SEE BACK PAGE)

TOWNSHIP OF BRICK ZONING CHECKLIST

1) Three (3) copies of 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.

2) Two copies of the plans with dimensions and heights noted:

- Floor plans and elevations
- Signed site plans
- Property map
- Survey map

Choose which is applicable for submission

3) Plot plans and building plans must match for complete review

NOTE: NO PARTIAL, TAPED, FAXED, REDUCED OR ENLARGED COPIES CAN BE ACCEPTED

01/2010

OFFICE USE ONLY

ZONING REVIEW:

DATE REVIEWED: 6/12/13 DATE DENIED: 6/12/13 DATE APPROVED: — INTLS: JGS

DATE:	COMMENTS:	INITIALS:
6/12/13	INCOMPLETE - LETTER SENT	JGS

245 Attachment 5

Township of Brick

SCHEDULE OF AREA, YARD AND BUILDING REQUIREMENTS
Township of Brick
Ocean County, New Jersey

[Amended 6-26-1979 by Ord. No. 354-2B-79; 4-22-1980 by Ord. No. 354-2H-80; 10-14-1980 by Ord. No. 354-2N-80; 9-23-1980 by Ord. No. 354-1B-80; 8-25-83 by Ord. No. 354-2SS-83; 11-5-1984 by Ord. No. 354-2-AAA-84; 11-5-1984 by Ord. No. 354-2CCC-84; 6-24-1986 by Ord. No. 354-2WWW-86; 9-13-1988 by Ord. No. 354-2TTTT-88; 9-27-1988 by Ord. No. 354-2XXXX-88; 9-12-2000 by Ord. No. 354-2EE-00; 5-9-2000 by Ord. No. 354-2Z-00; 3-26-2002 by Ord. No. 354-2C-02; 11-26-2002 by Ord. No. 354-2L-02; 3-25-2003 by Ord. No. 354-2D-03; 6-13-2006 by Ord. No. 19-06]

Zone	Minimum Lot Size						Minimum Required Yard Depth						Maximum Lot Coverage by Building	Maximum Building Height				Minimum Floor/ Building Area (square feet) 2 stories/1 story	Maximum Allowable Impervious Coverage
	Interior Lots			Corner Lots			Principal Building				Accessory Building								
	Area (square feet)	Width (feet)	Depth (feet)	Area (square feet)	Width (feet)	Depth (feet)	Front Yard (feet)	Side Yard, Each (feet)	Both Sides Combined (feet)	Rear Yard (feet)	Side Yard (feet)	Rear Yard[3] (feet)		Stories	Eaves (feet)	Feet	Ridge (feet)		
R-R	40,000	150	150	40,000	150	150	50	25		50	25	25	25%	–	25			–	
RR-2	See § 245-90.																		
RR-3	See § 245-103.																		
R-20	20,000	100	125	25,000	100	125	40	15	–	40	10	10	25%	–	25	35	38.5	–	
R-15	15,000	100	115	17,250	100	115	35	12	–	35	10	10	25%	–	25	35	38.5	–	
R-10	10,000	90	100	10,500	100	100	30	6	20	20	5	5	30%	–	25	35	38.5	–	
R-7.5	7,500	75	90	9,000	75	90	25	6	15	15	5	5	30%	–	25	35	38.5	–	
R-5	5,000	50	75	6,000	50	75	20	5	12	15	5	5	35%	–	25	35	38.5	–	
O-P	15,000	100	150	15,000	100	150	50	10	–	50	20	50	35%[2]	2	–	35	38.5	1,500	70%
B-1	10,000	100	90	12,500	100	125	30	10	–	20	10	20	30%[2]	2	–	35	38.5	1,000	60%
B-2	20,000	125	125	20,000	125	125	50	10	–	50	10	50	30%[2]	2	–	35	38.5	2,000	65%
B-3	2 acres	200	200	2 acres	200	200	75	30	–	50	20	50	25%[2]	–	–	35	38.5	2,000	65%
B-4	5 acres	300	300	–	–	–	100	50(150[1])	–	100(150[1])	20	50	25%	3	–	35	38.5	30,000	70%
M-1	5 acres	300	300	5 acres	300	300	100	50	–	150	75	150	30%[2]	–	–	35	38.5	5,000	65%
R-M	25 acres	350	200	–	–	–	50	50	–	30	30	30	20%	–	25	35	38.5	–	65%
O-P-T	40,000	150	150	40,000	150	150	50	20	–	50	20	50	25%[2]	2	–	35	38.5	2,000	50%
H-S	See § 245-261.													–	–	–	–		70%

NOTES:
1 If adjacent to residential zone or use.
2 The maximum lot coverage shall refer only to that percentage of an affected lot which is suitable for building.
3 For rear yard setback requirements for accessory buildings on waterfront property, see § 245-10D.

Brick Township
Community Development and Land Use
401 Chambers Bridge Rd.
Brick, NJ 08723
(732) 262-1027 Fax(732) 262-2941

Application Date:	06/12/2013
Application Number:	ZA-13-00737
Permit Number:	
Project Number:	
Fee:	$50

Denial of Application

Date: 06/12/2013

To: G & J Eats, LLC
97 Princeton Avenue
Brick, NJ 08724

RE: 741 BRICK BLVD.
Block: 673 Lot: 13 Qual: Zone: B-3

Dear G & J Eats, LLC,

Your request is hereby denied based upon the following requirements:

Your application is incomplete.

Please submit three copies of the approved site plan map, or three survey maps, to a permit clerk.

Sincerely,

Office of Zoning,

Brick Township
Community Development and Land Use
401 Chambers Bridge Rd.
Brick, NJ 08723
(732) 262-1027 Fax(732) 262-2941

Application Date: 06/12/2013
Application Number: ZA-13-00737
Permit Number:
Project Number:
Fee: $50

Denial of Application

Date: 06/12/2013

RECEIVED
JUN 17 2013
Resubmittal

To: G & J Eats, LLC
97 Princeton Avenue
Brick, NJ 08724

RE: 741 BRICK BLVD.
Block: 673 Lot: 13 Qual: Zone: B-3

Dear G & J Eats, LLC,

Your request is hereby denied based upon the following requirements:

Your application is incomplete.

Please submit three copies of the approved site plan map, or three survey maps, to a permit clerk.

Sincerely,

Sean Kinney ZO

Office of Zoning,

Comcast
Brick Blvd
Sidewalk
Handicap
Handicap
Sign
Grass
Comcast Parking
Dumpster
Hudson City Savings

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Board of Exam. of Electrical Contractors

HAS LICENSED

JOHN D. KELEIGH
1041 SALLY IKE RD
BRICK NJ 08724-1227

FOR PRACTICE IN NEW JERSEY AS A(N): Electrical Contractor

01/22/2012 TO 03/31/2015
VALID

34EI00490900
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Exam. of Electrical Contractors
HAS LICENSED
JOHN D. KELEIGH
Electrical Contractor

01/22/2012 TO 03/31/2015
VALID

34EI00490900

SIGNATURE

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:
Board of Exam. of Electrical Co
P.O. Box 45006
Newark, NJ 07101

PLEASE DETACH HERE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Board of Exam. of Electrical Contractors

HAS LICENSED

JOHN KELEIGH ELECTR CONTR
JOHN D KELEIGH
1041 SALLY IKE RD
BRICK NJ 08724-1227

FOR PRACTICE IN NEW JERSEY AS A(N): Electrical Business Permit

01/25/2012 TO 03/31/2015
VALID

34EB00490900
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Exam. of Electrical Contractors
HAS LICENSED
JOHN KELEIGH ELECTR CONTR
Electrical Business Permit

01/25/2012 TO 03/31/2015
VALID

34EB00490900

SIGNATURE

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:
Board of Exam. of Electrical Con
P.O. Box 45006
Newark, NJ 07101

PLEASE DETACH HERE

AIR CONDITIONER
INDOOR UNIT
Wall Mounted Type

⚠ CAUTION

R410A
REFRIGERANT

This Air Conditioner contains and operates with refrigerant R410A.

THIS PRODUCT MUST ONLY BE INSTALLED OR SERVICED BY QUALIFIED PERSONNEL.

Refer to Commonwealth, State, Territory and local legislation, regulations, codes, installation & operation manuals, before the installation, maintenance and/or service of this product.

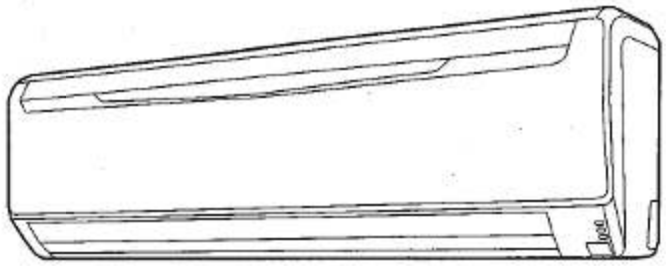
English

Français

Español

INSTALLATION MANUAL

For authorized service personnel only.



Contents

PART NO. 9318739022-02

1. SAFETY PRECAUTIONS

1.1. IMPORTANT! Please read before starting

This air conditioning system meets strict safety and operating standards.
As the installer or service person, it is an important part of your job to install or service the system so it operates safely and efficiently.

For safe installation and trouble-free operation, you must:

- Carefully read this instruction booklet before beginning.
- Follow each installation or repair step exactly as shown.
- Observe all local, state, and national electrical codes.
- Pay close attention to all danger, warning, and caution notices given in this manual.

WARNING: This symbol refers to a hazard or unsafe practice which can result in severe personal injury or death.

CAUTION: This symbol refers to a hazard or unsafe practice which can result in personal injury and the potential for product or property damage.

- Hazard alerting symbols

Electrical

Safety/alert

If Necessary, Get Help

These instructions are all you need for most installation sites and maintenance conditions. If you require help for a special problem, contact our sales/service outlet or your certified dealer for additional instructions.

In Case of Improper Installation

The manufacturer shall in no way be responsible for improper installation or maintenance service, including failure to follow the instructions in this document.

1.2. SPECIAL PRECAUTIONS

When Wiring

ELECTRICAL SHOCK CAN CAUSE SEVERE PERSONAL INJURY OR DEATH. ONLY A QUALIFIED, EXPERIENCED ELECTRICIAN SHOULD ATTEMPT TO WIRE THIS SYSTEM.

- Do not supply power to the unit until all wiring and tubing are completed or reconnected and checked.
- Highly dangerous electrical voltages are used in this system. Carefully refer to the wiring diagram and these instructions when wiring. Improper connections and inadequate earthing (grounding) can cause accidental injury or death.
- Earth (Ground) the unit following local electrical codes.
- Connect all wiring tightly. Loose wiring may cause overheating at connection points and a possible fire hazard.

When Transporting

Be careful when picking up and moving the indoor and outdoor units. Get a partner to help, and bend your knees when lifting to reduce strain on your back. Sharp edges or thin aluminum fins on the air conditioner can cut your fingers.

When Installing...

...In a Ceiling or Wall

Make sure the ceiling/wall is strong enough to hold the unit's weight. It may be necessary to construct a strong wood or metal frame to provide added support.

...In a Room

Properly insulate any tubing run inside a room to prevent "sweating" that can cause dripping and water damage to walls and floors.

...In Moist or Uneven Locations

Use a raised concrete pad or concrete blocks to provide a solid, level foundation for the outdoor unit. This prevents water damage and abnormal vibration.

...In an Area with High Winds

Securely anchor the outdoor unit down with bolts and a metal frame.
Provide a suitable air baffle.

...In a Snowy Area (for Heat Pump-type Systems)

Install the outdoor unit on a raised platform that is higher than drifting snow.

When Connecting Refrigerant Tubing

- Keep all tubing runs as short as possible.
- Use the flare method for connecting tubing.
- Apply refrigerant lubricant to the matching surfaces of the flare and union tubes before connecting them, then tighten the nut with a torque wrench for a leak-free connection.
- Check carefully for leaks before opening the refrigerant valves.

When Servicing

- Turn the power OFF at the main circuit breaker panel before opening the unit to check or repair electrical parts and wiring.
- Keep your fingers and clothing away from any moving parts.
- Clean up the site after you finish, remembering to check that no metal scraps or bits of wiring have been left inside the unit being serviced.
- After installation, explain correct operation to the customer, using the operating manual.

⚠ DANGER

Never touch electrical components immediately after the power supply has been turned off. Electrical shock may occur. After turning off the power, always wait 5 minutes or more before touching electrical components.

ENGINEERING PERMIT APPLICATION

RECEIVING CLERK: _____

PERMIT #: _____

BLOCK: 673 LOT: 13 ADDRESS: 741 - Brick Blvd Brick N.J. 07823

IDENTIFICATION:

1. WORK SITE ADDRESS: 741 - Brick Blvd.
2. NAME OF OWNER IN FEE: Ruben. Acosta / Felix Morales

   ADDRESS: Mt Prospect Ave. PHONE #: (973) 485-9395

   Newark N.J, 07004 FAX #: (__) _____
3. PRINCIPAL CONTRACTOR: _____

   ADDRESS: _____ PHONE #: (__) _____

   _____ FAX #: (__) _____
4. ARCHITECT OR ENGINEER: _____

   ADDRESS: _____ PHONE: # (__) _____
5. RESPONSIBLE PERSON FOR WORK: Luis Linares

   ADDRESS: 741 - Brick Blvd. Brick N.J. 08723

PHONE #: (732-998-6933) FAX #: (__) _____ E-MAIL: _____

FEE SUMMARY:

APPLICATION FEE: $ _____

REVIEW FEE: $ _____

INSPECTION FEE: $ _____

OTHER _____: $ _____

BOND(S): $ _____

TOTAL: $ _____

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING

☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL

☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL _____

☐ OTHER _____

LENGTH: _____ WIDTH: _____ HEIGHT: _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS: _____

DRAINAGE EASEMENTS: _____

UTILITY EASEMENTS: _____

CONSERVATION EASEMENTS: _____

FEMA REQUIREMENTS: _____

D.E.P. PERMITS: _____

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER: _____

APPROVED DATE: _____

ENGINEERING REVIEW:

DATE RECEIVED: _____ DATE REJECTED: _____ DATE APPROVED: _____ INITIALS: _____

Ocean County Health Department

OCEAN COUNTY HEALTH DEPARTMENT

No. _____

SANITARY INSPECTION REPORT

ESTABLISHMENT INFORMATION

PHONE # (732) 998-6933

ESTABLISHMENT TRADING NAME: Shut up and Eat

NUMBER AND STREET: 741 Brick Blvd

CITY OR MUNICIPALITY: Brick

ZIP CODE: 08723

ESTABLISHMENT LICENSE NO.:

COMMUN. CODE: 1506

RISK: II

ESTABLISHMENT CODE: 26

GOODS
- ☐ DESTROYED
- ☐ EMBARGOED

EVALUATION
- ☑ SATISFACTORY
- ☐ CONDITIONALLY SATISFACTORY
- ☒ UNSATISFACTORY

WATER SUPPLY
- ☐ Public - Community
- ☐ Individual (public - Non-community)

OWNER INFORMATION
(Complete this section only if different from establishment information)

NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT: Luis Linares

NUMBER AND STREET: 741 Brick Blvd

CITY OR MUNICIPALITY: Brick

STATE: NJ

ZIP CODE: 08723

COMMUN. CODE: 1506

TIME (2400 HOURS)

DATE	BEGIN	END
5-15-13	10:45	11:30

COMPLAINT NO. _____

COMPLAINT REC. _____

COMPLAINT INSPECTED _____

INSPECTION TYPE
- ☐ COMPLAINT
- ☐ INITIAL INSPECTION
- ☐ REINSPECTION
- ☒ PLAN REVIEW
- ☐ CONFERENCE

TYPE OF ESTABLISHMENT
- ☒ RETAIL
- ☐ WHOLESALE
- ☐ VENDING MACHINE
  NO. OF MACHINES _____
- ☐ FROZEN DESSERT
- ☐ OTHER _____

Daniel E. Regenye
Health Officer
Sunset avenue
P.O. Box 2191
Toms River, N.J. 08754-2191
Telephone No. 732-341-9700

Tobacco O, V, NA.

NAME OF INSPECTING OFFICIAL (Print): Lawrence A. Newman

SIGNATURE OF INSPECTING OFFICIAL: LAN

PERMANENT REG. NO.: B-1762

H.D.134

Ocean County Health Department

Environmental Health Services

175 Sunset Ave
PO Box 2191
Toms River, NJ 08754
(732) 341-9700 x 7416
www.ochd.org

Public Health

DETAILED DATA SHEET

Establishment Trading Name	Establishment License No.	Date
Shut up and Eat		5-15-13
Signature of Inspecting Official:	**Municipality**	**Time - (2400 Hours)**
CAN	Brick	Begin 10.45 End 11:30

REG. NO./Date	NARRATIVE
note	Plan Approved with stipulations:
1)	Handwash sinks in prep area or per owner (not shown on plan)
2)	All lighting over food prep / storage areas protected from breakage
3)	Prep sink to have indirect drain

(Attach additional sheets if necessary)

Community Development and Land Use
401 Chambers Bridge Rd.
Brick NJ 08723
(732) 262-1027

Receipt

Payment Date 6/21/2013
Transaction # PMT-13-04738
Receipt #

Issued To Luis Linares

Description: Tenant Fit Up permit
741 Brick Blvd.
Shut up and Eat

Date Printed 6/21/2013
Check Number 1010

Cash	$0.00
Check	$50.00
Charge	$0.00
Total Paid	$50.00

Brick Township
401 Chambers Bridge Rd.

Brick, NJ 08723
(732) 262-1027

Date Issued:
Application Number: ZA-13-00737
Application Date: 06/17/2013
Project Number:
Permit Number:
Fee: $50

Zoning Permit

Worksite Location: **741 BRICK BLVD.**
Brick Township, NJ

Block: **673**
Lot: **13**
Qualifier:
Zone: **B-3**

Owner: **226 MARKET REALTY LLC ATTN:R.ACOSTA**
Address: **15 EAST KINNEY ST**
NEWARK, NJ 07102

Applicant: **G & J Eats, LLC**
Address: **97 Princeton Avenue**
Brick, NJ 08724

Application Approved Date: 06/17/2013

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Use is: Restaurant -"Shut Up and Eat" (former "Friendly's").
Nonconforming Use is:

Work Description:
Rehabilitation - Alterations for a new business, "Shut Up and Eat" restaurant, to replace "Friendly's restaurant.

Upon review it was determined that the Development Application:

- ☑ Permitted by Ordinance
- ☐ Permitted by Variance approved on:
- ☐ Valid Nonconforming Use is established by
  - ☐ Zoning Board of Adjustment
  - ☐ Zoning Officer

Sean Kinney 20
Office of Zoning

06/17/2013
Date

Michael P. Fowler, Township Planner

6/18/13
Date

VOLLRATH®
The Vollrath Company, L.L.C.
1236 North 18th Street
P.O. Box 611
Sheboygan, WI 53082-061

Operating and Safety Instructions

Gas Char Broiler & Gas Flat Top Griddles

Char Broiler Model Numbers:

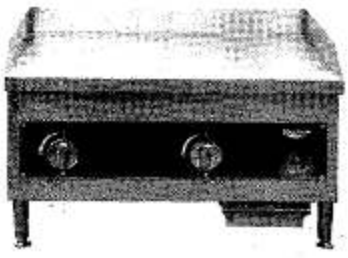
40728, 12" Lava Rock/Radiant, 28,000 BTU/hr – Natural Gas*
40729, 16" Lava Rock/Radiant, 28,000 BTU/hr – Natural Gas*
40730, 24" Lava Rock/Radiant, 56,000 BTU/hr – Natural Gas*
40731, 36" Lava Rock/Radiant, 84,000 BTU/hr – Natural Gas*
40837, 48" Lava Rock/Radiant, 112,000 BTU/hr – Natural Gas*
40838, 60" Lava Rock/Radiant, 140,000 BTU/hr – Natural Gas*

Standard Flat top Griddles Model Numbers:

40718 - 12" 28,000 BTU/hr – Natural Gas*
40719 - 16" 28,000 BTU/hr – Natural Gas*
40720 - 24" 56,000 BTU/hr – Natural Gas*
40721 - 36" 84,000 BTU/hr – Natural Gas*
40839 - 48" 112,000 BTU/hr – Natural Gas*
40840 - 60" 140,000 BTU/hr – Natural Gas*

*Includes kit for conversion to Propane Gas.

IMPORTANT: It is vital that the purchaser of this equipment post in a prominent location instructions to be followed in the event that the user smells gas. This information shall be obtained by consulting the local gas supplier.



INSTALLATION, OPERATION AND CARE OF :

40728 /40729 /40730 /40731 /40737 /40838 CHARBROILER LAVAROCK
40718 /40719 /40720 /40721 /40839 /40840 FLATTOP GRIDDLE

THIS INSTRUCTION BOOKLET COVERS THE ENTIRE RANGE OF GAS GRIDDLES AND BROILERS. PLEASE ENSURE THAT YOU CHECK THE MODEL NO. AT THE REAR OF THE UNIT AND FOLLOW THE SPECIFIC INSTRUCTIONS PERTAINING TO THE RELEVANT PRODUCT.

THESE INSTRUCTIONS MUST BE FOLLOWED FOR US TO GUARANTEE OUR FULL SUPPORT OF YOUR CLAIM FOR PROTECTING AGAINST LOSS FROM CONCEALED DAMAGE. THE FORM FOR FILING SUCH A CLAIM WILL BE PROVIDED BY THE CARRIER.

UNPACKING: Unpack the product and check for any damage incurred during transit. This should be reported to the responsible carrier, railway or postal authority, and a request for a damage report should be made. Remove the strapping securing the internal parts before operation.

GENERAL INSTALLATION AND OPERATION INSTRUCTIONS:

FOR YOUR SAFETY

DO NOT STORE OR USE GASOLINE OR OTHER FLAMMABLE VAPOURS OR LIQUIDS IN THE VICINITY OF THIS OR ANY OTHER APPLIANCE.
KEEP THE APPLIANCE AREA FREE AND CLEAR FROM COMBUSTIBLES

WARNING

IMPROPER INSTALLATION, ADJUSTMENT, ALTERATION, SERVICE OR MAINTENANCE CAN CAUSE PROPERTY DAMAGE, INJURY OR DEATH. READ THE INSTALLATION, OPERATING AND MAINTENANCE INSTRUCTIONS THOROUGHLY BEFORE INSTALLING OR SERVICING THE EQUIPMENT.

INSTALLATION INSTRUCTIONS:

1. **RATING PLATE** - It is essential that when communicating with the factory, the model and serial numbers be quoted. Other information on this plate is the operating gas pressure in inches WC, BTU/hr output of the burners, and whether the unit is orificed for natural or propane gas.

2 **PLEASE NOTE THAT THE APPLIANCE MUST ONLY BE CONNECTED TO THE TYPE OF GAS IDENTIFIED ON THE RATING PLATE!**

3. **CLEARANCES AND POSITIONING** - When positioning ensure that there is adequate clearance for air to enter the combustion chambers.
The following clearances need to be observed as these units are certified for the following installations only:
PLEASE NOTE : THESE BROILERS AND GRIDDLES CAN ONLY BE OPERATED IN NON-COMBUSTIBLE LOCATIONS

	CLEARANCE
	NON - COMBUSTIBLE
BACK	150 MM (6 “)
RIGHT SIDE	150 MM (6”)
LEFT SIDE	150 MM (6”)

4. **AIR SUPPLY AND VENTILATION** - The area in front and around the appliances must be kept clear to avoid any obstruction of the flow of combustion and ventilation air. Adequate clearance must be maintained at all times in front of and at the sides of the appliance for servicing and proper ventilation. Do not obstruct the flow of combustion and ventilation air of the appliance.
Provide adequate clearance for air openings into the combustion chamber

5. **PRESSURE REGULATOR** - All commercial cooking equipment must have a Pressure Regulator on the incoming service line for safe and efficient operation, as service pressure may fluctuate with local demand.
   - A pressure regulator is provided with the unit depending on whether natural gas or propane is required.
   - Failure to install a pressure regulator will void the equipment warranty!
   - The regulators provided have ¾” inlet / outlet openings and are adjusted at the factory for 4” WC (Natural Gas) and 10” WC (Propane) depending on the customer's ordering instructions. Care must be taken to ensure that the regulator is not installed in a high heat area.

- Prior to connecting the regulator, check the incoming line pressure, as the regulators can only withstand a maximum pressure of ½ PSI (14" WC). If the line pressure is beyond this limit, a step down regulator will be required.
  The arrow forged into the bottom of the regulator body shows gas flow direction, and should point downstream to the appliance.
- Only qualified service personnel may make any adjustment to the regulator.

6. **GAS CONVERSION** - Conversion from Propane to Natural Gas or vice versa may only be performed by the factory or it's authorised service agent.
   - In the case of troubleshooting, ensure that the correct orifice sizes of the spuds have been provided.

	NATURAL GAS	LP GAS
ORIFICE	#40	#53

NB : THE ORIFICE SIZE IS MARKED ON THE SPUD

7. **GAS CONNECTION** - The hot plate comes fitted with a ¾ " N.P.T male adapter for connection to the pressure regulator.

8. **GAS PIPING** - Gas Piping shall be of such size and so installed as to provide a supply of gas sufficient to meet the full gas input of the appliance. If the appliance is to be connected to existing piping, it shall be checked to determine if it has adequate capacity. Joint compound (pipe dope) shall be used sparingly and only on the male threads of the pipe joints. Such compounds must be resistant to the action of L.P gases.

   WARNING: Any loose dirt or metal particles, which are allowed to enter the gas lines on this appliance, will damage the valve and affect its operation. When installing this appliance, all pipe and fittings must be free from all internal loose dirt.

9. **MANUAL SHUT OFF VALVE** - A manual shut off valve should be installed upstream from the manifold and within 1.2m (4ft) of the griddle and in a position where it can be reached in the event of an emergency.

10. **CHECKING FOR GAS LEAKS** - A soapy water solution is recommended for locating gas leakage. Matches, candle flame or other sources of ignition shall not be used for this purpose. Check entire piping system for leaks.

11. **EXHAUST CANOPY** - GRIDDLES inherently create a good deal of heat and smoke and should be installed under an efficient exhaust hood with flame proof filters. A vertical distance of not less than 1.2m (4ft) shall be provided between the top of the appliance and filters or any other combustible material.

GENERAL OPERATING INSTRUCTIONS:

PILOT LIGHTING INSTRUCTIONS:

The units are equipped with standing pilots, and should be lit immediately after the gas is turned on.

- Turn off main valve to unit and wait 5 minutes to clear gas.
- Turn off all knobs and pilot valves.
- Turn on main valve and light all pilots.
- The pilot burner must be lit , at the end of the tube. Hold an ignition source (6 " fire lighter) Through the opening in the front panel at the pilot tube. When the flame is established remove ignition source.

SMOKE APPEARING ON INITIAL USE OF THE APPLIANCE IS NORMAL. THIS IS AS A RESULT OF THE RUST PREVENTING COATING BURNING OFF. ALLOW THE UNIT TO 'BURN IN' FOR AT LEAST HALF AN HOUR BEFORE THE FIRST USE

1. **PILOT FLAME REGULATION**: The pilot flame on the griddle has been adjusted at the factory. Adjust pilot flames as small as possible, but high enough to light the burner immediately when burner valve is turned to the 'High' setting. Access to the pilot flame adjustment screw is obtained by removing the front panel.

2. **BURNER OPERATION** : To ignite burners, turn burner valve knob to 'High' position. Each burner is controlled by an individual high-low, on-off valve. An infinite number of temperatures may be obtained by turning the burner valve knob to any position between high and low.

3. **BURNER ADJUSTMENT:**

- Remove the front panel to gain access.
- Turn burner valve knob to 'High' position.
- Slowly decrease mixing ring aperture to give a soft blue flame having luminous tips, then slowly increase opening to a point where the yellow Tips disappear and a hard blue flame is obtained.

4. **SHUTTING DOWN INSTRUCTIONS:**

- Turn the burner valve knobs to the off position to turn burners off.
- Turn main gas supply valve off.
- Allow period of 5 minutes to clear gas before appliance is re-lighted.

English

SPECIFIC OPERATING INSTRUCTIONS:

FLATTOP GRIDDLES

40718 / 40719 / 40720 /40721 / 40839 / 40840

1. Turn the valves on and pre-heat unit on 'High' before attempting to grill. Adjust the valve setpoint to obtain the desired heat.

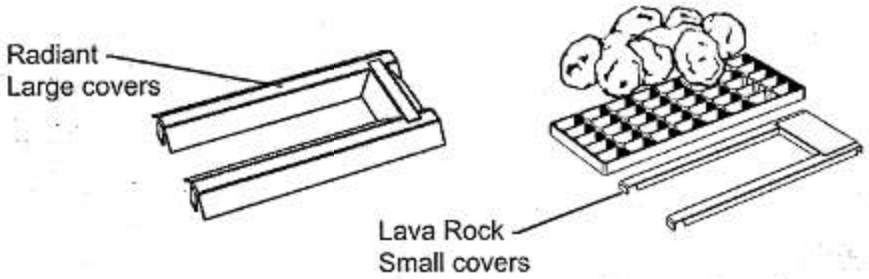
2. The fat tray is located at the bottom of the unit, and is easily removed from the front of the unit. The fat tray catches grease and should be emptied periodically, depending on the usage of the griddle.

3. Air for combustion enters from the bottom of the unit. Do not obstruct this area.

CHARBROILERS -LAVAROCK / RADIANT

40728 / 40729 / 40730 / 40731 / 40837 / 40838

1. The CBL range of grillers can be assembled either as a lava rock unit or a radiant unit. Both kits are packed into the box. The following diagram indicates the assembly of each of the units as required.
CARE MUST BE TAKEN TO FIT THE CORRECT RADIANT COVERS TO THE DESIRED UNIT.



Use a 5lb bag of lava rock per burner when installing

2. Turn the valves on and pre-heat unit on 'High' before attempting to broil.

3. It is recommended that the grate be set at the full tilt position to start with.

4. This position allows the grease to run down the grate into the grease tray, reducing flare-ups.

5. Check water pans frequently and add a sufficient amount of water when necessary. Hot water vapours rising from the water pans and through the combustion chamber helps reduce flare-ups.

6. Exercise care when using the broiler.

7. To tilt the grate raise or lower the grate to the next step by lifting the grate at the back of the char broiler where the grate rests. Use potholders or gloves to reposition. It is possible through this arrangement to have a high heat or searing section, while having a low heat finishing or holding section. For the searing operation, set the valves for the section 'High' or close to it. For holding or finishing, set the valves to low.

8. The water pan is located at the bottom of the unit, and is easily removed from the front of the unit. Water should be added to the water pan and replaced as necessary. The water pan helps prevent flare-ups and catches grease.

GENERAL CLEANING & MAINTENANCE INSTRUCTIONS:

DAILY CLEANING AND MAINTENANCE

- Remove large pieces of food residue and carefully scrape spill-over from the drip tray below the cooking surface.
- Wash all exterior and interior surfaces with hot soapy water solution. DO NOT use harsh abrasives on any portion of the stainless or coated surfaces.

SERVICE / REPAIR

- A qualified service company should check the unit for safe and efficient operation on an annual basis.Contact the factory representative or local service company to perform maintenance and repairs.

THE STAINLESS STEEL BODY PARTS SHOULD BE WIPED REGULARLY WITH HOT SOAPY WATER. DO NOT USE STEEL WOOL, ABRASIVE CLOTHS, CLEANERS OR POWDERS TO CLEAN STAINLESS STEEL SURFACES!

SPECIFIC CLEANING & MAINTENANCE INSTRUCTIONS: CHARBROILERS -LAVAROCK / RADIANT 40728 / 40729 / 40730 / 40731 / 40837 / 40838

1. Cast iron grates should be scraped with a wire brush frequently, and periodically soaked in a hot water solution to remove grease from the pores of the cast iron. NEVER expose the grate(s) to extreme heat for the purposes of burning off excess grease. This practice will shorten the useful life of the grate.

2. In the case of the Lava Rock this should be turned over about once a week depending upon the amount of cooking and type of food prepared. High heat will effectively clean and burn off grease. A loosely placed layer of rock will serve as an effective base. About one-half layer of rock should be strategically added to compensate for 'hot spots'.

3. Over-filling the char broiler will obstruct proper air flow creating poor combustion, an uneven heating pattern, and will ultimately shorten the useful life of cast iron bottom grates and burners. As the lava rock disintegrates over time, rock smaller than a golf ball should be removed and replenished with new, larger rock.

SAFETY:

For your safety, the following safety precautions should be followed and enforced: -

1. Instructions must be posted in a prominent location and all safety precautions taken in the event the user smells gas. Obtain this information from your local gas supplier.

2. **IF YOU SMELL GAS!!!**
   - **OPEN WINDOWS**
   - **DO NOT TOUCH ELECTRICAL SWITCHES OR PLUGS**
   - **EXTINGUISH ANY OPEN FLAMES**
   - **IMMEDIATELY CALL YOUR GAS SUPPLIER**

3. Install this appliance in non – combustible locations only.

4. Do not place combustible or non – combustible material in the vicinity of the unit as this could cause fires or obstruct airflow to the burners.

5. The installation must conform to the National Fuel Gas Code ANSI Z223.1/NFPA 54 Or the Natural Gas and Propane Installation Code, CSA B149.1

6. The appliance must be isolated from the gas supply piping system by closing its individual manual shut off valve during any pressure testing of the gas supply piping system at test pressures equal to or less than½" PSI. (3.45 kPa) The appliance and its individual shutoff valve must be disconnected from the gas supply piping system during any pressure testing of that system at test pressures in excess of ½ PSI (3.5kPa).

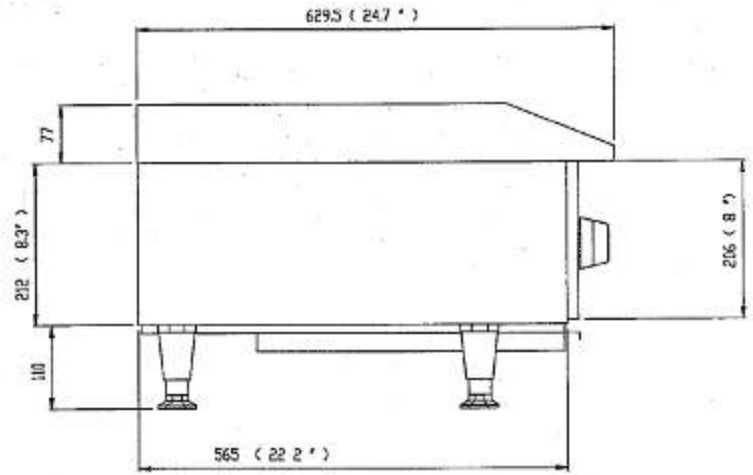
7 For your protection, we recommend a competent installation agency install this appliance.

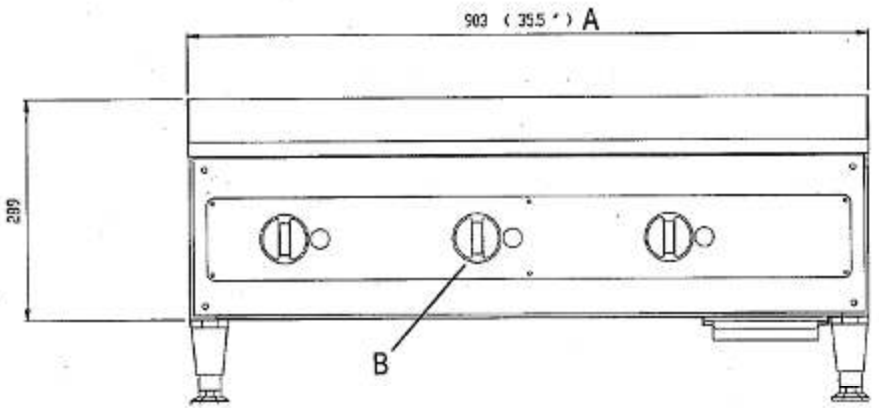
8 Retain this manual for future reference.

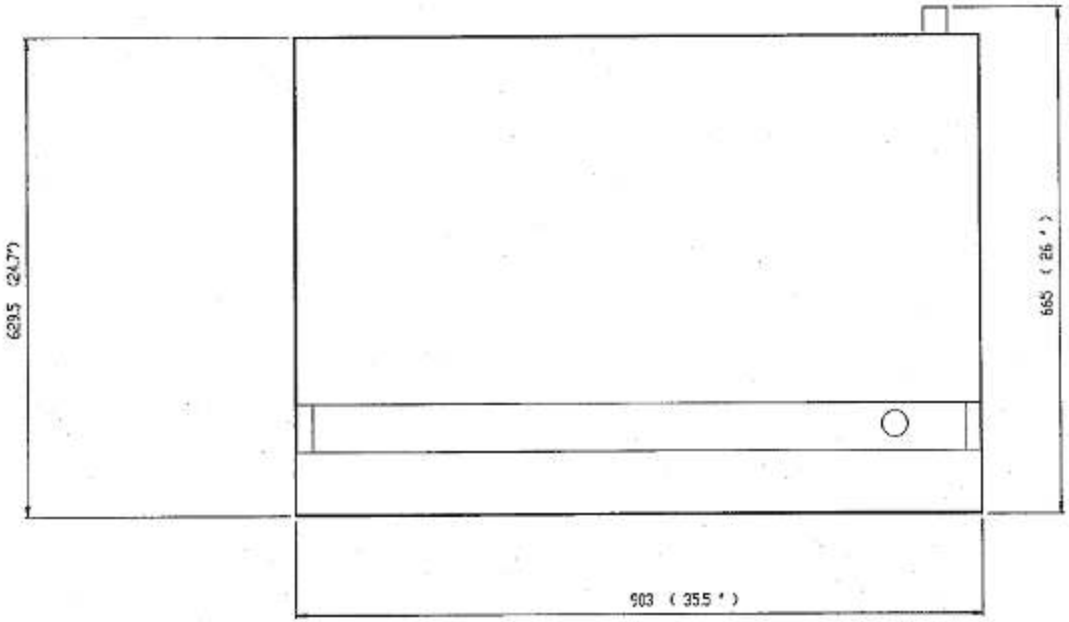
BROILERS ARE HOT! NEVER ATTEMPT TO CHANGE THE GRILL POSITION WHILE COOKING. FLARE UPS CAN OCCUR UNEXPECTEDLY. TURN OFF THE BROILER, AND ALLOW THE BROILER TO COOL.

DESCRIPTION OF MODELS:

MODEL	DESCRIPTION	BURNERS	POWER (Btu)
40728	12" RADIANT LAVA ROCK	1	28 000
40729	16" RADIANT LAVA ROCK	1	28 000
40730	24" RADIANT LAVA ROCK	2	56 000
40731	36" RADIANT LAVA ROCK	3	84 000
40837	48" RADIANT LAVA ROCK	4	112 000
40838	60" RADIANT LAVA ROCK	5	140 000
40718	12" RADIANT FLATTOP	1	28 000
40719	16" RADIANT FLATTOP	1	28 000
40720	24" RADIANT FLATTOP	2	56 000
40721	36" RADIANT FLATTOP	3	84 000
40839	48" RADIANT FLATTOP	4	112 000
40840	60" RADIANT FLATTOP	5	140 000



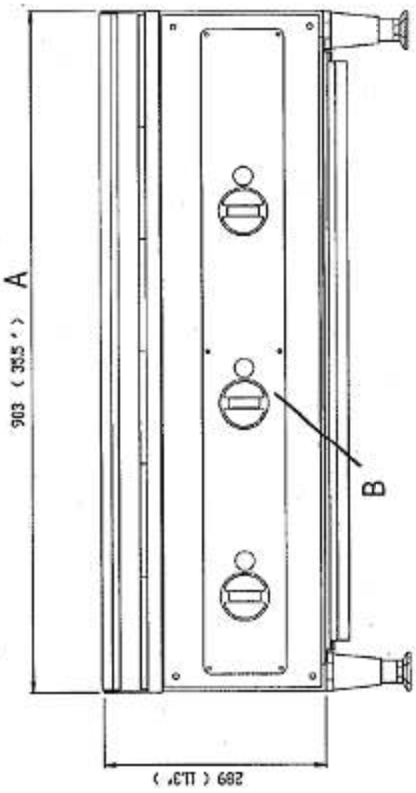


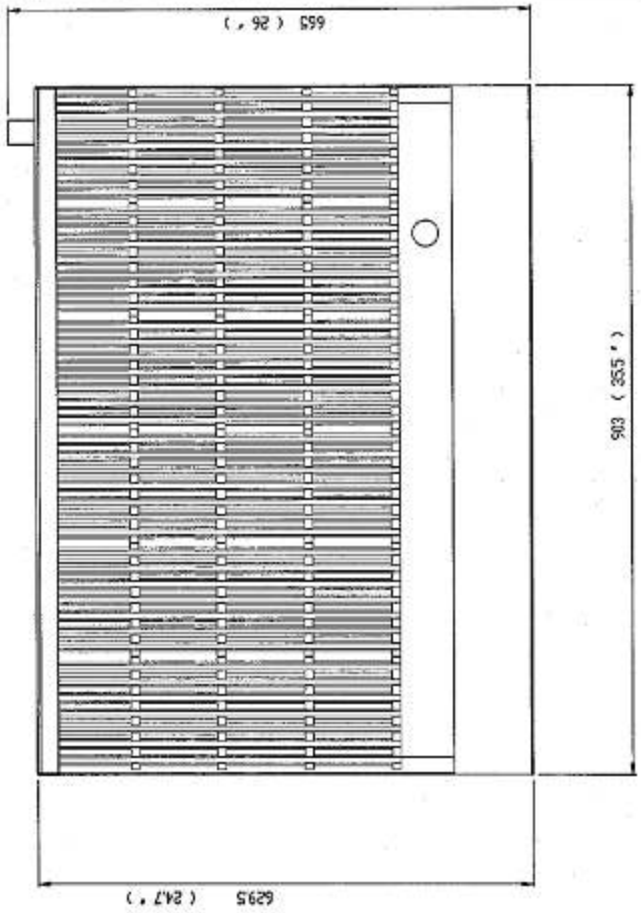


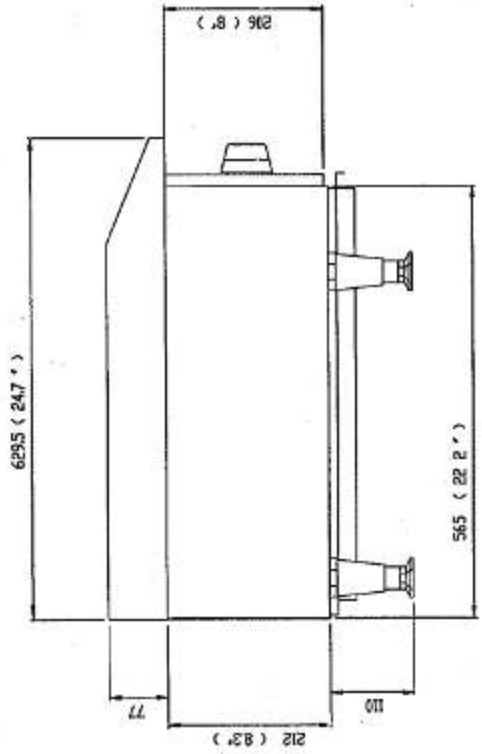
MODEL	SIZE A	CONTROL B
40718	303mm - 12"	1
40719	453mm - 17.8"	1
40720	603mm - 23.7"	2
40721	903mm - 35.5"	3
40839	1208 mm - 47.5"	4
40840	1514mm - 59.5"	5

GAS CHAR BROILER / FLAT TOP GAS GRIDDLE

English







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40838	1514mm - 59.5"	5

WARRANTY INFORMATION

Warranty Policy for The Vollrath Company L.L.C

The Vollrath Company L.L.C. warranties all products it manufactures and distributes against defects in materials and workmanship for a period of one year - except as listed below:

- Refrigeration compressors – 5 year warranty
- Intrigue & Classic Select cookware – Limited lifetime warranty
- Replacement parts – 90 (ninety days) on the part only
- Fry pans and coated cookware – 90 (ninety days)

All warranties cover normal use and service only and are void if the product has been damaged by accident, neglect, improper use or other causes not arising out of defects in material or workmanship. The Vollrath Company shall not be liable for loss of use of the product or other incidental or consequential costs, expenses or damage incurred by the purchaser.

Warranty work must have prior approval from The Vollrath Company L.L.C.

Vollrath Equipment Warranty

All Vollrath equipment is repaired or replaced at the discretion of The Vollrath Company L.L.C., in accordance with the warranty policy listed above. Should you have a problem with your equipment and it is under warranty, please contact The Vollrath Warranty Service number and a technical representative will assist you. Please have the model number, serial number and proof of purchase information available when calling.

The Vollrath Company L.L.C. Warranty Service Number 1-800-628-0832

IMPORTANT! WARRANTY REGISTRATION

Please register your new equipment via our online registration form at:

www.vollrathco.com/register.jsp

If you do not have access to the web, kindly register by completing this form and faxing to the Vollrath office: Fax **920–459–6573**

Business Name	
Key Contact Name	
Street Address	
City	
State	
Zip Code	
Country	
Phone	
Fax	
Email	
Model	
Item Number	
Serial Number	☐☐☐☐-☐☐☐☐☐☐☐-☐☐☐☐

Operation Type

☐ Limited Service Restaurant	☐ Full Service Restaurant	☐ Bars and Taverns	☐ Supermarket
☐ Convenience Store	☐ Recreation	☐ Hotel/Lodging	☐ Airlines
☐ Business/Industry	☐ Primary/Secondary School	☐ Colleges/University	☐ Hospitals
☐ Long-Term Care	☐ Senior Living	☐ Military	☐ Corrections

Reason for Selection of our Product

☐ Appearance	☐ Full Service Restaurant	☐ Availability	☐ Sellers Recommendation
☐ Ease of Operation	☐ Versatility of Use	☐ Price	☐ Brand

Would you like our full line catalog and to remain on our mailing list?

☐ Yes ☐ No

INSTALLATION, FONCTIONNEMENT ET ENTRETIEN :

40728 /40729 /40730 /40731 /40737 /40838 CHARBROILER LAVAROCK
40718 /40719 /40720 /40721 /40839 /40840 FLATTOP GRIDDLE

CE MODE D'EMPLOI COUVRE TOUTE LA GAMME DES PLAQUES CHAUFFANTES. VEILLEZ À VÉRIFIER LE NO DU MODÈLE À L'ARRIÈRE DE L'UNITÉ ET SUIVEZ LES INSTRUCTIONS SE RAPPORTANT À CET APPAREIL.

CES INDICATIONS DOIVENT ÊTRE SUIVIES NIMUTIEUSEMENT AFIN QUE NOUS PUISSIONS VOUS GARANTIR NOTRE SUPPORT EN CAS DE RECLAMATION DE VOTRE PART POUR TOUT DÉGAT DÛ A UN DEFAUT DE FABRICATION. LE FORMULAIRE A REMPLIR EN CAS DE RÉCLAMATION VOUS SERA FOURNI PAR LE TRANSPORTEUR.

DÉBALLAGE: Déballez le produit et assurez-vous qu'il n'y ait pas de dégâts survenus pendant le transport Ils doivent être signalés au transporteur responsable, à l'administration des chemins de fer ou de la poste et une declaration de sinistre doit être introduite. Enlevez la courroie qui fixe les parties internes avant opération.

INSTRUCTIONS GÉNÉRALES D'INSTALLATION ET DE FONCTIONNEMENT:

POUR VOTRE SÉCURITÉ

NE STOCKEZ OU N'UTILISEZ PAS D'ESSENCE OU D'AUTRES VAPEURS OU LIQUIDES INFLAMMABLES À PROXIMITÉ DE CET APPAREIL OU D'UN AUTRE.

DANGER:

INSTALLATION, RÉGLAGE, MODIFICATION, RÉVISION OU ENTRETIEN INAPPROPRIÉS PEUVENT ENTRAÎNER DES DÉGÂTS MATÉRIELS, DES BLESSURES OU LA MORT. LISEZ MINUTIEUSEMENT LES INSTRUCTIONS CONCERNANT L'INSTALLATION, LE FONCTIONNEMENT OU L'ENTRETIEN DE L'APPAREIL.

SunFire®

INSTALLATION AND OPERATION MANUAL

SUNFIRE X SERIES GAS RESTAURANT RANGES

All 24, 36, & 60-inch wide models.

FOR YOUR SAFETY:
DO NOT STORE OR USE GASOLINE OR OTHER FLAMMABLE VAPORS OR LIQUIDS IN THE VICINITY OF THIS OR ANY OTHER APPLIANCE

WARNING:
IMPROPER INSTALLATION, ADJUSTMENT, ALTERATION, SERVICE OR MAINTENANCE CAN CAUSE PROPERTY DAMAGE, INJURY, OR DEATH. READ THE INSTALLATION, OPERATING AND MAINTENANCE INSTRUCTIONS THOROUGHLY BEFORE INSTALLING OR SERVICING THIS EQUIPMENT

PLEASE READ ALL SECTIONS OF THIS MANUAL AND RETAIN FOR FUTURE REFERENCE.

THIS PRODUCT HAS BEEN CERTIFIED AS COMMERCIAL COOKING EQUIPMENT AND MUST BE INSTALLED BY PROFESSIONAL PERSONNEL AS SPECIFIED.

IN THE COMMONWEALTH OF MASSACHUSETTS THIS PRODUCT MUST BE INSTALLED BY A LICENSED PLUMBER OR GAS FITTER.

For Your Safety:
Post in a prominent location, instructions to be followed in the event the user smells gas. This information shall be obtained by consulting your local gas supplier.

Users are cautioned that maintenance and repairs must be performed by a Garland authorized service agent using genuine Garland replacement parts. Garland will have no obligation with respect to any product that has been improperly installed, adjusted, operated or not maintained in accordance with national and local codes or installation instructions provided with the product, or any product that has its serial number defaced, obliterated or removed, or which has been modified or repaired using unauthorized parts or by unauthorized service agents.
For a list of authorized service agents, please refer to the Garland web site at http://www.garland-group.com.
The information contained herein, (including design and parts specifications), may be superseded and is subject to change without notice.

GARLAND COMMERCIAL INDUSTRIES
185 East South Street
Freeland, Pennsylvania 18224
Phone: (570) 636-1000
Fax: (570) 636-3903

GARLAND COMMERCIAL RANGES, LTD.
1177 Kamato Road, Mississauga, Ontario L4W 1X4
CANADA
Phone: 905-624-0260
Fax: 905-624-5669

Part # 4523343 Rev 2 (03/04/10)

IMPORTANT INFORMATION

WARNING:

This product contains chemicals known to the state of california to cause cancer and/or birth defects or other reproductive harm. Installation and servicing of this product could expose you to airborne particles of glass wool/ceramic fibers. Inhalation of airborne particles of glass wool/ceramic fibers is known to the state of california to cause cancer. Operation of this product could expose you to carbon monoxide if not adjusted properly. Inhalation of carbon monoxide is known to the state of california to cause birth defects or other reproductive harm.

Keep appliance area free and clear of combustibles.

TABLE OF CONTENTS

DIMENSIONS AND SPECIFICATIONS

Clearances

Clearances Applicable For All Models		
Surface	**Sides**	**Rear**
Combustible Wall Minimum	14" (356mm)	6" (152mm)
Non-Combustible Wall Minimum	0"	0"

Gas Pressures

Gas	Minimum Supply Pressure	Manifold Operating Pressure
Natural	7"WC (17.5 mbar)	4.5"WC (11.25 mbar)
Propane	11"WC (28 mbar)	10"WC (25 mbar)

Gas Inlet Size

Model Width	Connection
24" (610mm) & 36" (914mm)	3/4" NPT Rear Gas Connection
60" (1524mm)	1" NPT Rear Gas Connection

Individual Burner Input Rates

Burner	Input BTU/HR	
	Natural Gas	Propane Gas
Open Top	30,000	26,000
Hot Top Burner (In lieu of 2 open top burners)	18,000	18,000
Griddle Burner (In lieu of 2 open top burners)	18,000	18,000
Raised Griddle Broiler (Consists of 3 burners)	33,000	33,000
Oven Burner Standard	33,000	29,000
Space Saver Oven	25,000	25,000

Rates are for installations up to 2000' (610m) above sea level

DIMENSIONS AND SPECIFICATIONS continued

Base Model Designations & Total Input Rates

Model #	Description	Input BTU/Hr	
		Natural Gas	Propane Gas
X24-4S	24" (610mm) nominal size unit, 4 open burners, storage base	120,000	104,000
X24-4L	24" (610mm) nominal size unit, 4 open burners, space saver oven	145,000	129,000
X36-6S	36" (914mm) nominal size unit, 6 open burners, storage base	180,000	156,000
X36-6R	36" (914mm) nominal size unit, 6 open burners, standard oven	213,000	185,000
X60-10RS	60" (1524mm) nominal size unit, 10 open burners, 1 Standard oven, storage base	333,000	289,000
X60-10RR	60" (1524mm) nominal size unit, 10 open burners, 2 standard ovens	366,000	318,000
X60-6R24SS	60" (1524mm) nominal size unit, 6 open burners, 24" (610mm) Raised Griddle/Broiler, 2 storage bases	203,000	189,000
X60-6R24RS	60" (1524mm) nominal size unit, 6 open burners, 24" (610mm) Raised Griddle/Broiler, standard oven, storage bases	246,000	218,000
X60-6R24RR	60" (1524mm) nominal size unit, 6 open burners, 24" (610mm) Raised Griddle/Broiler, 2 standard ovens	279,000	247,000

Rates are for installations up to 2000' (610m) above sea level

INTRODUCTION

1. Check crate for possible damage sustained during transit. Carefully remove unit from crate and again check for damage. Any damage to the appliance must be reported to the carrier immediately.
2. The wires for retaining packing material must be removed from units. Any protective material covering stainless steel parts must also be removed.
3. All equipment is supplied with 6" (152mm) legs unless specified to be dais for cove base mounting, casters or deck mount flanged feet. 60" (1524mm) wide units have legs factory mounted. Base mounting is required when range is being installed on a combustible floor.
4. The type of gas and supply pressure that the equipment was set-up for at the factory is noted on the rating plate and on the packaging. This type of gas supply must be used.
5. Do not remove permanently affixed labels, warnings or rating plates from the appliance, for this may invalidate the manufacturer's warranty.

Rating Plate

All burner input rates are shown on the rating plate, which is located behind the lower front drop down panel under the oven door.

This product has been certified as commercial cooking equipment and must be installed by professional personnel as specified. THIS APPLIANCE IS NOT RECOMMENDED FOR RESIDENTIAL INSTALLATION.

We suggest installation, maintenance and repairs should be performed by your local Garland/US Range authorized service agency.

Siting

The floor on which the appliance is to be sited must be capable of adequately supporting the weight of the appliance and any ancillary equipment. Units with ovens must be fitted with legs if installed on a combustible floor. Adequate clearance must be provided for servicing and proper operation.

Appliances Equipped With Casters

1. The installation shall be made with a connector that complies with the Standard for Connectors for Moveable Gas Appliances, ANSI Z21.69/CSA 6.16, Addenda Z21.69B-2006/CSA 6.16B-2006 (or latest edition), and a quick-disconnect device that complies with the Standard for Quick Disconnects for Use with Gas Fuel, ANSI Z21.41/ CSA 6.9, Addenda Z21.41A-2005/CSA 6.16A-2005 (or latest edition).
2. The front casters of the appliance are equipped with brakes to limit the movement of the appliance without placing any strain on the connector or quick disconnect device or its associated piping.
3. Please be aware; required restraint is attached to a bracket, (which is located on the rear of the caster closest to the gas connection), and if disconnection of the restraint is necessary, be sure to reconnect the device after the appliance has been returned to its original position.

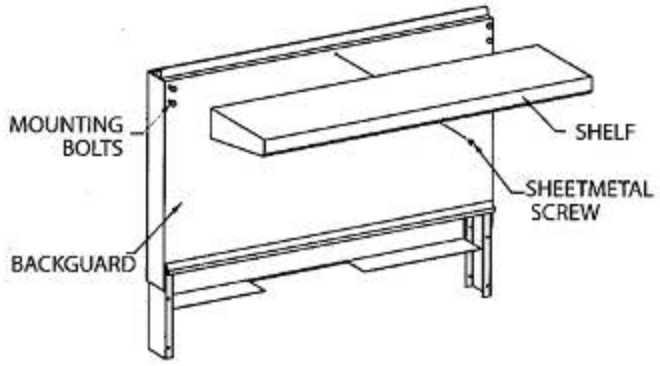
Appliances Equipped With Legs

1. Raise the front of the appliance and block. Do not lay the appliance on its back.
2. Legs are threaded to be easily screwed into the holes provided on the bottom of the range.
3. Once legs have been attached and secured they can be adjusted to level the appliance and compensate for uneven flooring.

Installing Shelf To Backguard

Note: Shelf may be installed before or after installing the backguard to the range.

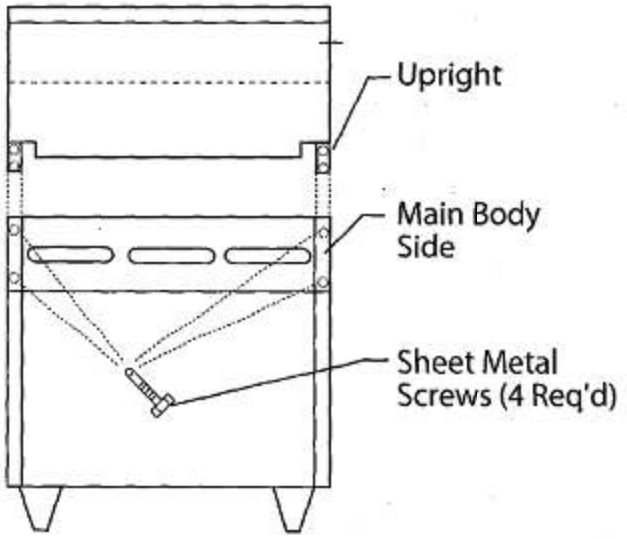
1. Loosen 4 bolts on the front of the backguard approximately 1/4" (6mm).
2. Align the 4 slotted holes on the back of the shelf with the 4 bolts on the backguard.
3. Slide the shelf downward until the 4 bolts are engaged in the slotted portion of the keyhole.
4. Tighten the 4 bolts to secure the shelf.
5. On 60" units only, install a sheet metal screw though the hole in the underside of the shelf into the backguard and tighten.



Backguard With High Shelf, Salamander Or Cheesemelters Mounting Instructions

1. Rear of the range must be easily accessible.
2. Place the backguard, high shelf, salamander, or cheesmelter on the rear of the range, slipping the support brackets into the openings in the main body sides.

3. Securely fasten the support brackets to the burner box sides with (4) sheet metal screws provided.



Ventilation Air

The following notes are intended to give general guidance. For detailed recommendations, refer to the applicable code(s) in the country of destination.

Proper ventilation is critical for optimum performance. The ideal method of ventilating open-top equipment is the use of a properly designed canopy that should extend six inches (152 mm), beyond all sides of the appliance(s) and six feet, six inches (1981mm) above the floor.

A strong exhaust will create a vacuum in the room. For an exhaust vent to work properly, replacement air must be equal to the amount of exhausted. An imbalance between exhaust and replacement air can cause degradation in the appliance's performance.

All gas burners and pilots need sufficient air to operate. Large objects should not be placed in front of the appliance(s) that would obstruct the flow of air into the front.

Statutory Regulations

The installation of this appliance must be carried out by a competent person and in accordance with the relevant regulations, codes of practice and the related publications of the country of destination.

The installation must conform to the National Fuel Gas Code ANSI Z223.1, or latest edition, NFPA No.54 - latest edition/or local code to assure safe and efficient operation. In Canada, the installation must comply with CSA B149.1 and local codes.

Gas Connection

The local gas authority should be consulted at the installation planning stage in order to establish the availability of an adequate supply of gas and to ensure that the meter is adequate for the required flow rate. The pipe work from the meter to the appliances must be an appropriate size.

All fixed (non-mobile) appliances MUST be fitted with an accessible Upstream gas shut off valve as a means of isolating the appliance for emergency shut off and for servicing. A union or similar means of disconnection must be provided between the gas-cock and the appliance.

A manually operable valve must be fitted to the gas supply to the kitchen to enable it to be isolated in an emergency. Wherever practical, this shall be located either outside the kitchen or near to an exit in a readily accessible position.

Where it is not practical to do this, an automatic isolation valve system shall be fitted which can be operated from a readily accessible position near to the exit.

In locations where the manual isolation valve is fitted or the automatic system can be reset a notice MUST be posted stating:

"ALL DOWNSTREAM BURNER AND PILOT VALVES MUST BE TURNED OFF PRIOR TO ATTEMPTING TO RESTORE THE SUPPLY. AFTER EXTENDED SHUT OFF, PURGE BEFORE RESTORING GAS."

Installation Notes

Before assembly and connection check gas supply.

A. The type of gas for which the unit is equipped is stamped on the data plate located behind the lower front panel. Connect a unit stamped "NAT" only to natural gas; connect one stamped "PRO" only to propane gas.

B. If it is a new installation have the gas authorities check meter size and piping to assure that the unit is supplied with necessary amount of gas pressure required to operate the unit.

C. If it is additional or replacement equipment have the gas authorities check pressure to make certain that existing meter and piping will supply fuel to the unit with no more than 0.15 Kpa pressure drop.

D. Make certain new piping and connections have been made in a clean manner and have been purged so that piping compound, chips, etc. will not clog pilots, valves or burners. Use pipe joint compound approved for natural and liquefied petroleum gases.

NOTE: Gas pressure should be checked when the unit is installed and all other equipment on the same line is on. The operating gas pressure must be the same as that specified on the rating plate. If necessary, pressure adjustment may be made at the pressure regulator supplied with the appliance.

The appliance and its individual shut-off valve must be disconnected from the gas supply piping system during any pressure testing of that system where pressures are in excess of 1/2 PSIG (3.45kPa.)

Final Preparation

NOTE: Your new range has a plastic coating to help protective the finish from scratches during shipping. This protective plastic film should be pealed off prior to starting the range.

TESTING AND ADJUSTMENT

Testing

All fittings and pipe connections must be tested for leaks. Use approved gas leak detectors, soap solution or equivalent, checking over and around all the fittings and pipe connections. DO NOT USE A FLAME! Accessibility to all gas lines and fittings require that valve panel(s) lower front panel(s), and/or oven rack(s) be removed. It may be necessary to remove, or at least raise and securely prop griddle(s), hot top(s), and/or top grate(s). All parts removed, (including fasteners), should be stored safely for re-installation.

1. Be sure that all valves and thermostats are in the "OFF" position.
2. Turn on the main gas supply valve. Light all top section pilots.
3. Leak test all valves and fittings as described at the beginning of this section. Correct any leaks as required and recheck.
4. Light the oven pilot.
5. Set the oven thermostat to maximum. Leak test all valves and fittings as described at the beginning of this section. Correct any leaks as required and recheck.
6. Shut off all valves and set thermostat dials to "OFF" or lowest position. All units are tested and adjusted at the factory, however, burners and pilots should be checked upon installation and adjusted if necessary.

CAUTION: Gas will flow to the top section burners even if top section pilots are not lit. Gas will not be interrupted. It is the responsibility of the operator to confirm the proper ignition of each burner as it is turned on. Should ignition fail to occur 4 seconds after turning a burner on, turn the burner off, wait 5 minutes, and try again.

OPERATION

Caution: In the event that a binding malfunction valve or thermostat control is observed DO NOT light the pilots or continue operation until an authorized service technician has inspected the appliance. Failure to do so may result in injury.

Open Top burners

Lighting

1. Light pilots adjacent to each burner.
2. Turn valve completely on. Burner flame should be 1/2" (13mm) high, stable and blue in color. It should also impinge on the bottom of a pot placed on the burner grate.

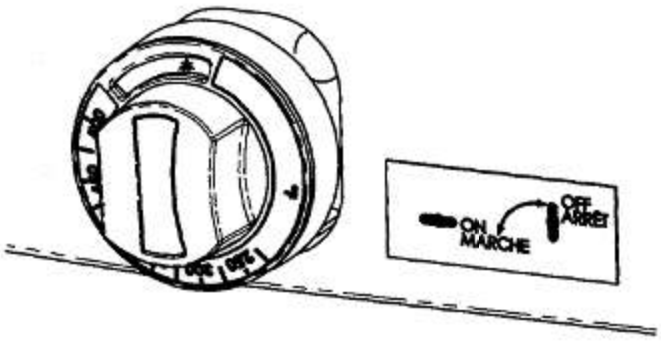
CAUTION: Should burner ignition fail within 4 seconds, turn the burner valve off and repeat steps 1 through 2. If ignition continues to fail, consult your factory authorized service agency.

Ovens (Standard)

Lighting

1. Lower front kick panel below oven door, raise oven hearth bottom for easy access to oven pilot.
2. Turn oven control knob (figure 1) to "★" position and then push in to engage the flow of gas through the safety device to the pilot.

Figure 1

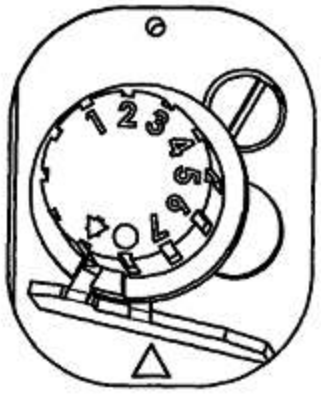


3. While holding knob in, light pilot with a match/BBQ lighter or use the spark ignition (if provided) to spark ignite pilot.
4. Continue to hold knob in for 15 seconds after ignition, then release. Pilot should remain lit.
5. If pilot burner fails to light or does not stay lit, wait 5 minutes and repeat steps 2 through 4.
6. Replace hearth and close kick panel, then turn oven thermostat to desired cooking temperature.
7. To shut down main burner turn control knob (figure 1) to "★" position.

Shut Down

If pilot shut down is required loosen the set screw on the knob and remove the outer temperature thermostat knob by carefully pulling it off. Then push in and turn the inner control knob (figure 2) to ● position. The system will disengage with 60 seconds.

Figure 2



Hot Top Sections

1. Raise or remove hot top plate section(s). Each burner has one pilot located at the front left side of the burner.
2. Light pilots. The pilot burner should be adjusted to provide for rapid ignition of the burner.
3. Turn the burner valve on. A sharp blue flame should be approximately 1/4-inch, (6mm), high.
4. Replace hot top sections.

Valve Controlled Griddles

See griddle seasoning before use.

1. Pilots should be lit though the front panel with an extend match. If necessary the front panel of the range can be removed to allow the griddle plates to be raised at the front, block securely.

2. Light pilots located at the front right side of each burner.
3. Turn burner valves completely on. Burners should have 1/2-inch to 5/8-inch, (13mm to 16mm), stable blue flame.
4. If the griddle has been raised, lower carefully into position and replace the front panel of the range.

Griddle/Broiler

(Models X60-6R24RR, X60-6R24SS, X60-6R24RS,

See griddle seasoning before use.

Before turning on main gas supply, be sure all burner valves are in the "OFF" position.

1. Eight (8) ceramic bricks are supplied with each range. These ceramics are to be placed in the burner section of the griddle / broiler before it is put into operation.
2. Each burner has a flange on each side which will serve as a rest for a pair of ceramics. Position two ceramics between each pair of burners with the projections facing downward. Place two ceramics between the outside burner on each side, using the side lining ledges as the outer support.
3. Light the pilots located in the broiler section.
4. Turn the burner valves completely on. Burners should exhibit a 5/16-inch stable blue flame.

NOTE: If burners need adjustment contact an authorized licensed gas technician.

Range Shut down

1. Turn all valves to the "OFF" position.
2. If the unit is to be shut down for an extended period of time, close the in-line gas valve.

PRODUCT APPLICATION INFORMATION

General

The range is the workhorse of the kitchen because of its versatility. Most frequently used in small applications, such as cafes, schools, church kitchens, firehouses, and small nursing homes where demands are less taxing. As a general rule of thumb, one four to six burner range with a hot top will be adequate for a restaurant seating 30 to 35.

The top of the range is designed for flexibility and the preparation of numerous different types of products. It may be equipped with two, or even three different types of tops and burners, depending on the menu needs. An operation that cooks to order, or uses the range primarily as back-up will find that open burners will suit most of their needs.

Preparation of soups, stocks, or sauces is done on a hot top where slow, even cooking is desirable.

Heating larger quantities of food can be done more efficiently than heating small quantities. Pots and pans should be covered whenever possible to reduce energy consumption.

High acid sauces, such as tomato should be cooked in stainless steel rather than aluminum to avoid chemical reaction. Light colored sauces such as Alfredo may be discolored by the use of aluminum, especially if stirred with a metal spoon or whip. Saltwater shellfish may pit aluminum pots if they are frequently used for this purpose.

NOTE: Many parts of the commercial range are raw steel. Hot tops, griddles, springs, door hooks etc., can react with the moisture forming rust. This occurrence is normal and not considered a defect. Clean with a stainless steel or fiber pad. A light coating of cooking oil may be applied.

Open Burners

The most traditional uses of open burners are sautéing, pan frying, and small stock pot work. Short-term cooking is the most efficient use for the open burner. Pans should cover as much of the grate as possible to minimize heat loss. The maximum stock pot size to be used on an open burner is 12 inches, (305 mm), diameter. Open burners should be turned off when not in use to conserve energy. Leaving a flame burning is of no advantage since the heat is instantaneous.

Seasoning

Griddle

A. Remove all factory applied protective material by washing with hot water, mild detergent or soap solution.

B. Apply a thin coat of cooking oil to the griddle surface, about one ounce per square foot of griddle surface. Spread over the entire griddle surface with a cloth to create a thin film. Wipe off any excess oil with a cloth.

C. Light all burners, set at lowest possible setting. Some discoloration will occur when heat is applied to steel.

D. Heat the griddle slowly for 15 to 20 minutes. Then wipe away oil. Repeat the procedure 2 to 3 times until the griddle has a slick, mirror like finish. Do this until you have reached the desired cooking temperature.

IMPORTANT: Do not set to a high position (on valve control) during "break-in" period

NOTE: Steel griddle surface will tone (blue discoloration) from heat. This toning will not diminish function or operation and it is not a defect.

The griddle will not require reseasoning if it is used properly. If the griddle is over heated and product begins to stick to the surface it may be necessary to repeat the seasoning process again. If the griddle is cleaned with soap and water it will be necessary to reseason the griddle surface.

Cast Iron top Grates

First, remove the cast iron top grates from the range. Wash the cast iron top grates thoroughly with a mild soap and warm water. Dry the cast-iron top grates thoroughly with a clean cloth. Immediately after drying, season the top grates lightly with a non-toxic oil, (Liquid vegetable oil or Pam spray oil) WARNING; DO NOT SEASON THE TOP GRATES WHILE ON THE RANGE TOP! Seasoning grates on the range top over an open flame could cause a flash fire. After seasoning, replace the top grates onto the range. Turn all the range top sections "ON LOW". Allow the top sections to burn in this manner for at least 20 minutes before using pots or pans on the top grates. SEASONING OF THE TOP GRATES WILL BE REQUIRED WHENEVER THEY HAVE BEEN CLEANED. FAILURE TO SEASON GRATES WILL CAUSE RUSTING.

Stainless Steel

For routine cleaning just wash with a hot water and detergent solution. Wash just a small area at a time or the water will evaporate leaving the chemicals behind causing streaking.

Rinse the washed area with a clean sponge dipped in a sanitizing solution and wipe dry with a soft clean cloth before it can dry.

Use a paste (of water and a mild scouring powder) if you have to, but never rub against the grain. All stainless steel has been polished in one direction. Rub with the polish lines to preserve the original finish. Then thoroughly rinse as before.

To prevent fingerprints there are several stainless steel polishes on the market that leave an oily or waxy film. Do not use on surfaces that will be in contact with food.

Stainless steel may discolor if overheated. These stains can usually be removed by vigorous rubbing with a scouring powder paste.

Use only stainless steel, wood or plastic tools if necessary to scrape off heavy deposits of grease and oil. Do not use ordinary steel scrapers or knives, as particles of the iron may become imbedded and rust. STEEL WOOL SHOULD NEVER BE USED.

Either a typical bleach solution or hot water can be used to sanitize stainless steel.

Oven Interior (Porcelain Enamel)

1. Before cleaning oven interior, remove all oven racks and guides. Oven racks and guides can be cleaned with a mild soap and warm water or run through dish washer.

2. The porcelain interior can be cleaned with oven cleaners such as "Easy Off, or "Dow Oven Cleaner".

Follow product manufacturer's instructions for proper use.

Interior Cleaning of Standard Aluminized Steel Interior Surfaces

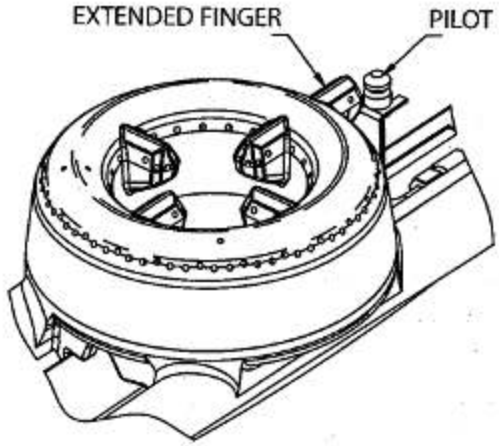
The oven sides and top linings are formed of heavy gauge steel with an aluminum fused into its surface to provide for the reflectance of heat back to the food being prepared and to virtually eliminate the possibility of rust formation. Establish a regular cleaning schedule or wipe off on the same day when spillovers occur.

1. Cool down oven.
2. Remove oven racks.
3. Lift rack guides on either side of oven off of holders, pull the top away from the cavity wall, when it's cleared the clips push down and remove. Racks and guides may be run through dishwasher while oven cavity is being cleaned.
4. Use a concentrated detergent on a plastic pad to remove burned on soil. Do Not Use Steel Wool, Oven Cleaner Or Abrasive Powders. These will remove the aluminum. Rinse with warm water on a soft cloth. Be sure to remove all traces of detergent. Any discoloration, which may remain after the soil build-up has been removed, will not affect the performance of the oven.
5. To reinstall reverse procedure. Place the bottom of the rack guide against the cavity wall. Keeping the top pulled away from the wall lift up. Push the top of the rack guide against the wall and push down locking it into place.

Open Top Burners

Cleaning of the range top burner is a simple procedure, and, if done at regular intervals will prolong the life of the range and ensure good flame characteristics.

1. The most common problem with open burner ranges is spillage. Once the burner ports are partially plugged with food, the air-to-gas mixture is disturbed and results in an inefficient burner.
2. Wipe any spills as they occur.
3. Grids and trays should be removed daily, washed, rinsed and dried thoroughly.
4. Use a wire brush to clean the ports of the burners. Ignite and check for clogged holes.
5. If any clogged holes are apparent, the burner should be lifted out and brushed inside and out with a small Venturi brush. Each port on the burner itself should be cleaned with a properly sized wire or thumb drill. Wash with soap and hot water if grease is observed on the burners. Dry thoroughly.
6. When reinstalling the open top burner head be sure the burner ports are lined up correctly to the pilot. On the cast burner head there is an extended finger with port openings, when this is in line with the pilot, the burner is installed correctly.



7 If an abnormal flame appears around the edges, it is usually a sign of grease dirt in the throat of the burner. Remove the burner venturi (main body that the burner heads sit on) to access the air shutter opening. Remove grease and dirt from the air shutter area carefully. Do not adjusting the shutter setting. The air shutter allows the proper amount of air to mix with the flow of gas coming in from your valve/thermostat orifice and should not be adjusted unless by a license gas fitter technician.

Cast Iron Top & Grates

Cast iron top and grate(s) can be cleaned with mild soap and warm water. For baked on material, a wire brush can be used. Dry thoroughly. Lightly coat with vegetable oil to help prevent rust from forming.

Hot Tops

While the surface is still slightly warm, wipe down with a clean burlap cloth. Burnt on spillage should be scraped off. If necessary, remove the plate and wash in a sink with soap and hot water. Dry thoroughly. In damp climates, wipe down with a light coating of oil to prevent rusting. Avoid excessive use of water as this could damage the surface and the controls below.

NOTE: Steel griddle and hot top surface will "tone" (blue/brown discoloration) from heat. This toning will not diminish function or operation and is not a defect.

Griddle

To produce evenly cooked, browned griddle products, keep griddle free from carbonized grease. Carbonized grease on the surface hinders the transfer of heat from the griddle surface to food product. This results in uneven browning and loss of cooking efficiency, and worst of all, carbonized grease tends to cling to grilled foods, giving them a highly unsatisfactory and unappetizing appearance. To keep the griddle clean and operating at peak performance, follow these simple instructions:

A. AFTER EACH USE clean griddle thoroughly with a grill scraper or spatula. Wipe off any excess debris left from cooking process.

B. ONCE A DAY clean griddle surface with a grill brick and grill pad. Remove grease container and clean thoroughly, in same manner as any ordinary cooking utensil.

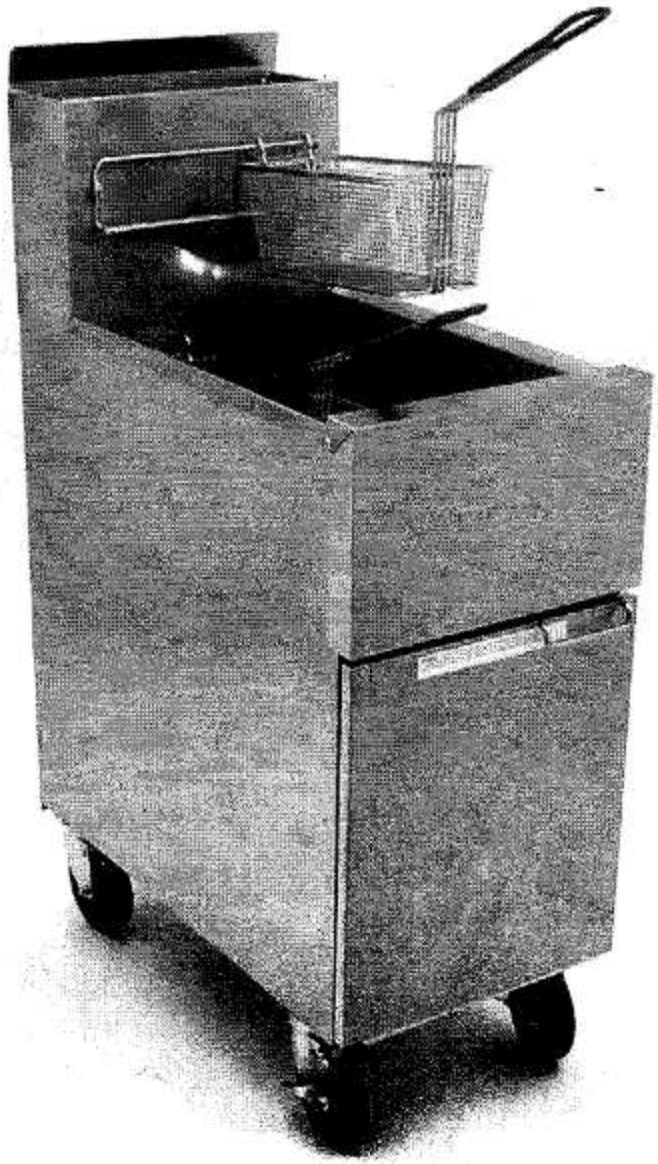
C. ONCE A WEEK clean griddle surface thoroughly. If necessary, use a grill stone or grill pad over the griddle surface. Rub with grain of the metal while still warm. A detergent may be used on the plate surface to help clean it, but care must be taken to be sure it is thoroughly removed. After removal of detergent, the surface of the plate should be covered with a thin film of oil to prevent rusting. To remove discolorations, use a non-abrasive cleaner. Before re-using, the griddle must be reseasoned. Keep griddle drain tube to grease container clear at all times.

CAUTION This griddle plate is steel, but the surface is relatively soft and can be scored or dented by careless use of spatula.

Be careful not to dent, scratch, or gouge the plate surface. This will cause food to stick in those areas. Also, note, since this is a steel griddle if a light coating of oil is not always present rust will develop on exposed and uncoated areas.

Super Runner Series Gas Fryers

Installation & Operation Manual



Series SR42, SR52 & SR62

10 500 - BTU

Dean

NON-CE &

CE

For Service, Call (318) 865-1711

Shipping Address: 8700 Line Avenue, Shreveport, Louisiana 71106

Price: $10.00

8195999A

OCTOBER 2011

PRINTED IN THE UNITED STATES

NOTICE

This appliance is intended for professional use only and is to be operated by qualified personnel only. A Frymaster/DEAN Factory Authorized Servicer (FAS) or other qualified professional should perform installation, maintenance, and repairs. Installation, maintenance, or repairs by unqualified personnel may void the manufacturer's warranty.

NOTICE

This equipment must be installed in accordance with the appropriate national and local codes of the country and/or region in which the appliance is installed.

NOTICE TO U.S. CUSTOMERS

This equipment is to be installed in compliance with the basic plumbing code of the Building Officials and Code Administrators International, Inc. (BOCA) and the Food Service Sanitation Manual of the U.S. Food and Drug Administration.

⚠ DANGER

Improper installation, adjustment, maintenance or service, and unauthorized alterations or modifications can cause property damage, injury, or death. Read the installation, operating, and service instructions thoroughly before installing or servicing this equipment. Only qualified service personnel may convert this appliance to use a gas other than that for which it was originally configured.

⚠ DANGER

Adequate means must be provided to limit the movement of this appliance without depending upon the gas line connection. Single fryers equipped with legs must be stabilized by installing anchor straps. If a flexible gas line is used, an additional restraining cable must be connected at all times when the fryer is in use.

⚠ DANGER

The front ledge of the fryer is not a step! Do not stand on the fryer. Serious injury can result from slips or contact with the hot oil.

⚠ DANGER

Do not store or use gasoline or other flammable liquids or vapors in the vicinity of this or any other appliance.

⚠ DANGER

Instructions to be followed in the event the operator smells gas or otherwise detects a gas leak must be posted in a prominent location. This information can be obtained from the local gas company or gas supplier.

NOTICE

IF, DURING THE WARRANTY PERIOD, THE CUSTOMER USES A PART FOR THIS MANITOWOC FOOD SERVICE EQUIPMENT OTHER THAN AN UNMODIFIED NEW OR RECYCLED PART PURCHASED DIRECTLY FROM FRYMASTER/DEAN, OR ANY OF ITS AUTHORIZED SERVICERS, AND/OR THE PART BEING USED IS MODIFIED FROM ITS ORIGINAL CONFIGURATION, THIS WARRANTY WILL BE VOID. FURTHER, FRYMASTER/DEAN AND ITS AFFILIATES WILL NOT BE LIABLE FOR ANY CLAIMS, DAMAGES OR EXPENSES INCURRED BY THE CUSTOMER WHICH ARISE DIRECTLY OR INDIRECTLY, IN WHOLE OR IN PART, DUE TO THE INSTALLATION OF ANY MODIFIED PART AND/OR PART RECEIVED FROM AN UNAUTHORIZED SERVICER.

NOTICE

The Commonwealth of Massachusetts requires any and all gas products to be installed by a licensed plumber or pipe fitter.

1.1 Safety Information

Before attempting to operate your unit, read the instructions in this manual thoroughly. Throughout this manual you will find notations enclosed in double-bordered boxes with the symbol ⚠. The information contained in the box concerns actions or conditions that may cause or result in injury to personnel or damage to your system, and/or cause your system to malfunction.

1.2 General Installation Instructions

⚠ DANGER
Building codes prohibit a fryer with its open frypot of hot oil being installed beside an open flame of any type, including those of broilers and ranges.

⚠ DANGER
This appliance must be installed with sufficient ventilation to prevent the occurrence of unacceptable concentrations of substances harmful to the health of personnel in the room where it is installed.

⚠ DANGER
No structural material on the fryer should be altered or removed to accommodate placement of the fryer under a hood.

⚠ DANGER
Single fryers must be restrained to prevent tipping when installed in order to avoid the splashing of hot liquid. The means of restraint may be the manner of installation, such as connection to battery of appliances or installing the fryer in an alcove, or by separate means, such as straps or chains.

⚠ DANGER
Do not attach an apron drainboard to a single unit. The appliance may become unstable, tip over, and cause injury. The appliance area must be free and clear of combustible material at all times.

NOTICE
This appliance is only for professional use and shall be used by qualified personnel only.

CLEARANCE AND VENTILATION

This fryer must be installed with a 6-inch (150-mm) clearance at both sides and back when installed adjacent to combustible construction. No clearance is required when installed adjacent to non-combustible construction. A minimum of 24-inches (600-mm) clearance should be provided at the front of the fryer.

The fryer flue opening must not be placed close to the intake of an exhaust fan, and the fryer must never have its flue extended in a "chimney" fashion. An extended flue will change the combustion characteristics of the fryer. To provide the airflow necessary for good combustion and burner operation, the areas surrounding the fryer front, sides, and rear must be kept clear and unobstructed.

The fryer must be installed in an area with an adequate air supply and adequate ventilation. Adequate distances must be maintained from the flue outlet of the fryer to the lower edge of the ventilation filter bank. Filters should be installed at an angle of 45°. Place a drip tray beneath the lowest edge of the filter. For U.S. installation, NFPA standard No. 96 states, "A minimum distance of 18-inches (450-mm) should be maintained between the flue outlet and the lower edge of the grease filter". *Frymaster recommends that the minimum distance be 24-inches (600-mm) from the flue outlet to the bottom edge of the filter.*

INSTALLATION

NOTE: ***Unless special ordered, this fryer is designed for operation at altitudes of 2000 feet (610 meters) and below. The unit must be modified for operation above 2000 feet (610 meters).***

For units equipped with legs: Lift the unit and move it into its final position. Do not drag or push the fryer into position. Doing so may damage the legs. Level the unit front to back and side to side. If the fryer is not level, the unit will not function efficiently. Super Runner Series gas fryers cannot be curb mounted and must be equipped with either legs or casters provided.

A. Adjust leg height with an adjustable or 1-1/16-inch (27-mm) open-end wrench by turning the hexagon-shaped foot on the bottom of the leg. **NOTE:** The foot is for minor leg height adjustment only. **Do not adjust outward more than ¾-inch (19-mm).**

B. When leveling the unit, the leg body should be held firmly to keep the leg from bending or rotating while turning the foot to the required height.

For units equipped with casters: Roll the unit into its final position and lock the front casters.

1.3 Pre-Connection Preparation

⚠ WARNING
If the incoming gas pressure is in excess of ½" PSI (3.45 kPa/35 mbar), a step-down regulator will be required.

CE UNITS ONLY:

Dean Super Runner gas fryers have obtained CE markings for countries and gas categories shown below:

Countries		Supply Pressures and Gas (mbar)		Appliance Categories
BE	Belgium	G20 G31	20/25 37	IIE(R)B3P
DE	Germany	G20 G31	20 50	I2E I3P
DK	Denmark	G20	20	I2H
ES	Spain	G20 G31	20 37 and 50	II2H3P
FR	France	G20/G25 G31	20/25 37 and 50	II2ESI3P
GB	Great Britain	G20 G31	20 37	II2H3P
GR	Greece	G20 G31	20 37 and 50	II2H3P
IR	Ireland	G20 G31	20 37	II2H3P
IT	Italy	G20	20	I2H
LU	Luxembourg	G20/G25 G31	20/25 50	II2E3P
NL	The Netherlands	G25 G31	25 50	II2L3P
PT	Portugal	G20 G31	20 37	II2H3P

NON-CE UNITS ONLY:

NATIONAL CODE REQUIREMENTS:

This equipment is to be installed in compliance with the Basic Plumbing Code of the Building Officials and Code Administrators International, Inc. (BOCA) and the Food Service Sanitation Manual of the U.S. Food and Drug Administration.

This equipment is manufactured to use the type of gas specified on the rating plate attached to the door. Connect equipment stamped "NAT" only to natural gas and that stamped "PRO" only to LP (Propane) gas.

AUSTRALIAN REQUIREMENTS:

To be installed on a firm, level surface in accordance with AS 5601 / AG 601, local authority, gas, electricity, and any other relevant statutory regulations. The Australian orifice size and manifold pressures are listed below for the SR62.

Model	Gas Type	Orifice Size	Manifold Pressure KPa	Manifold Pressure Inches WC
SR62	Nat	2.53 mm	0.9 KPa	3.6"
SR62	Prop	1.6 mm	2.4 KPa	9.6"

CE UNITS ONLY:
Nominal Heat Inputs (Qn), Gas Type, Orifice Size, Pressures and Adjustments, Orifice Quantity/Color, Burner Markings and Pilot Markings are listed in the table below:

MODEL*	NOMINAL HEAT INPUT-Qn (kW)	GAS TYPE	ORIFICE SIZE (MM)	MANIFOLD GAS PRESSURE		ORIFICE QTY/ COLOR	BURNER MARKING	PILOT MARKING
				MBAR	INCH W.C.			
SR62 GM	37.5	G20	2.40	12,0	4,8	5/BLUE	Blue	26N
		G25	2.40	17,5	7,0	5/BLUE	Blue	26N
		G31	1.51	22,0	8,8	5/RED	Red	16LP
SR52 GM	30	G20	2.40	12,0	4,8	4/BLUE	Blue	26N
		G25	2.40	17,5	7,0	4/BLUE	Blue	26N
		G31	1.51	22,0	8,8	4/RED	Red	16LP
SR42 GM	26	G20	2.40	12,0	4,8	3/BLUE	Blue	26N
		G25	2.40	17,5	7,0	3/BLUE	Blue	26N
		G31	1.51	22,0	8,8	3/RED	Red	16LP

*SR prefix- Super Runner Series
*GM suffix- gas millivolt system with no electrical supply connections required

NON-CE UNITS ONLY:

Nominal Heat Inputs (Qn), Gas Type, Orifice Size, Pressures and Adjustments, Orifice Quantity, and Pilot Markings are listed in the table below:

MODEL*	NOMINAL HEAT INPUT-Qn (BTU)	GAS TYPE	ORIFICE SIZE (MM)	MANIFOLD GAS PRESSURE (INCH W.C.)	ORIFICE QUANTITY	PILOT MARKING
SR62 GM	150	NAT	2.53(#39)	4	5	26N
		LP	1.51(#53)	11	5	16LP
SR52 GM	120	NAT	2.53(#39)	4	4	26N
		LP	1.51(#53)	11	4	16LP
SR42 GM	105	NAT	2.80(#35)	4	3	26N
		LP	1.70(#51)	11	3	16LP

*SR prefix- Super Runner Series
*GM suffix- gas millivolt system with no electrical supply connections required

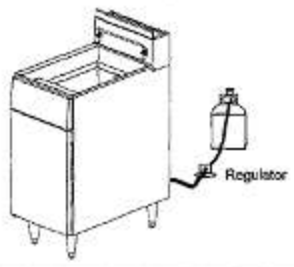
NOTE: Outlet gas pressure must be adjusted strictly within the above requirements 5 to 10 minutes after the appliance is operating.

1.4 Connection to the Gas Supply Line

NOTE: The gas supply (service) line must be the same size or greater than the fryer inlet line. This appliance is equipped with a ½-inch (15-mm) inlet. The gas supply line must be sized to accommodate all gas-fired equipment connected to the line. Consult the local gas company or supplier, or your local contractor for minimum supply line requirements.

NOTE: If quick-disconnect supply lines or flex lines are used, increase supply line size to ¾-inch (22-mm) or larger.

Propane Applications;
Proper Regulator Must Be Installed



⚠ DANGER

A manual shut-off valve must be installed in the gas supply (service) line upstream of this appliance and in a position where it can be reached quickly in the event of an emergency.

⚠ DANGER

The fryer must be connected to the gas supply specified on the rating and serial number plate located on the inside of the appliance door. DO NOT ATTACH THIS APPLIANCE TO A GAS SUPPLY FOR WHICH IT IS NOT CONFIGURED!

⚠ DANGER

Before connecting new pipe to this appliance, the pipe must be blown out thoroughly to remove all foreign material. Foreign material in the burner and gas valve will cause improper and potentially dangerous operation.

⚠ DANGER

All connections must be sealed with a joint compound suitable for the gas being used and all connections must be tested for leaks using a solution of soapy water before lighting any pilots. Never use matches, candles, or any other ignition source to check for leaks. If gas odors are detected, shut off the gas supply to the appliance at the main shut-off valve and immediately contact the local gas company or an authorized service agency for service.

Adequate means must be provided to limit the movement of fryers without depending upon the gas line connections. If a flexible gas hose is used, a restraining cable must be connected at all times when the fryer is in use. **NOTE: The installation must be inspected after it is complete to ensure it meets the intent of these instructions. The on-site supervisor and/or operator(s) should be informed that the appliance is installed with restraints. If restraints are removed to move fryer (cleaning beneath and behind, relocation, etc.), ensure that they are re-installed when fryer is returned to its permanently installed position.**

1.5 Gas Conversion Procedures

⚠ DANGER

This appliance was configured at the factory for a specific type of gas. Converting from one gas type to another requires the installation of specific gas-conversion components.

Switching to a different type of gas without installing the proper conversion components may result in fire or explosion. NEVER ATTACH THIS APPLIANCE TO A GAS SUPPLY FOR WHICH IT IS NOT CONFIGURED!

Conversion of this appliance from one type of gas to another should only be performed by qualified, licensed, and authorized installation or service personnel, as defined in Section 1.5 of this manual.

CE UNITS ONLY:

See gas valve illustration and gas valve, burner and orifice location when performing the following conversions.

When converting from G20 to G25 gas, the following procedures apply:

- Equipment replacement is not required.
- Adjust orifice gas pressure to the appropriate value listed in the table on page 1-3 by turning the gas valve "adjustment screw".
- After adjustment, replace the adjustment-screw cover.

When converting from G20 (or G25) gas to G31 propane (or vice-versa), the following procedures apply:

- Burner orifices and pilot orifice **MUST** be replaced.
- Adjust orifice gas pressure to the appropriate value listed in the table on page 1-3 by turning the gas-valve adjustment screw.
- After adjustment, replace the adjustment-screw cover.
- Affix the new label included with the conversion kit next the existing rating plate stating that the gas type has been converted. Remove any references to the previously used gas from the existing rating plate.

When converting from G20 (20 mbar) to G25 (25 mbar), or vice-versa, or G31 (37 mbar) to G31 (50 mbar), the following procedures apply:

- Check pilot-adjustment and adjust as necessary.
- Other adjustments are not necessary.

Conversion from one gas family to another (i.e. changing from natural gas to propane) requires special components. Obtain the necessary components using the cross-reference in Section 1.6, Gas Conversion Components.

Conversions can only be executed by qualified, factory-authorized personnel.

NON-CE UNITS ONLY:

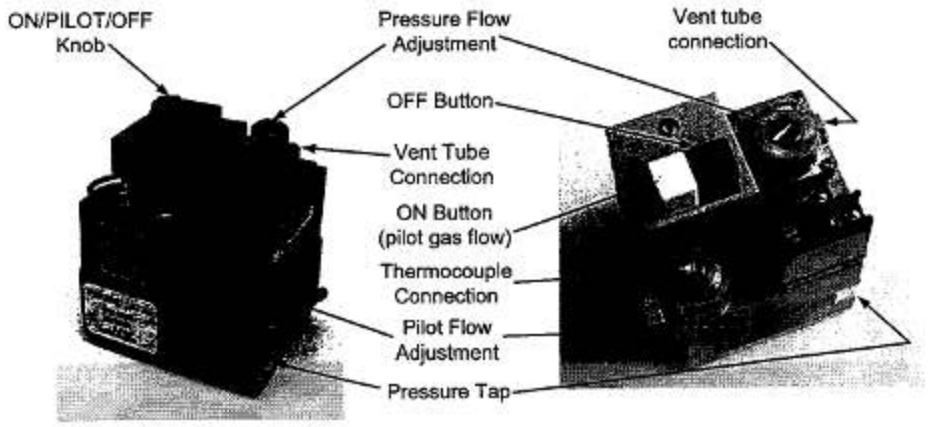
See gas valve illustration below and gas valve, burner and orifice location on page 1-6 when performing the following conversions.

When converting from natural gas to propane (or vice-versa), the following procedures apply:

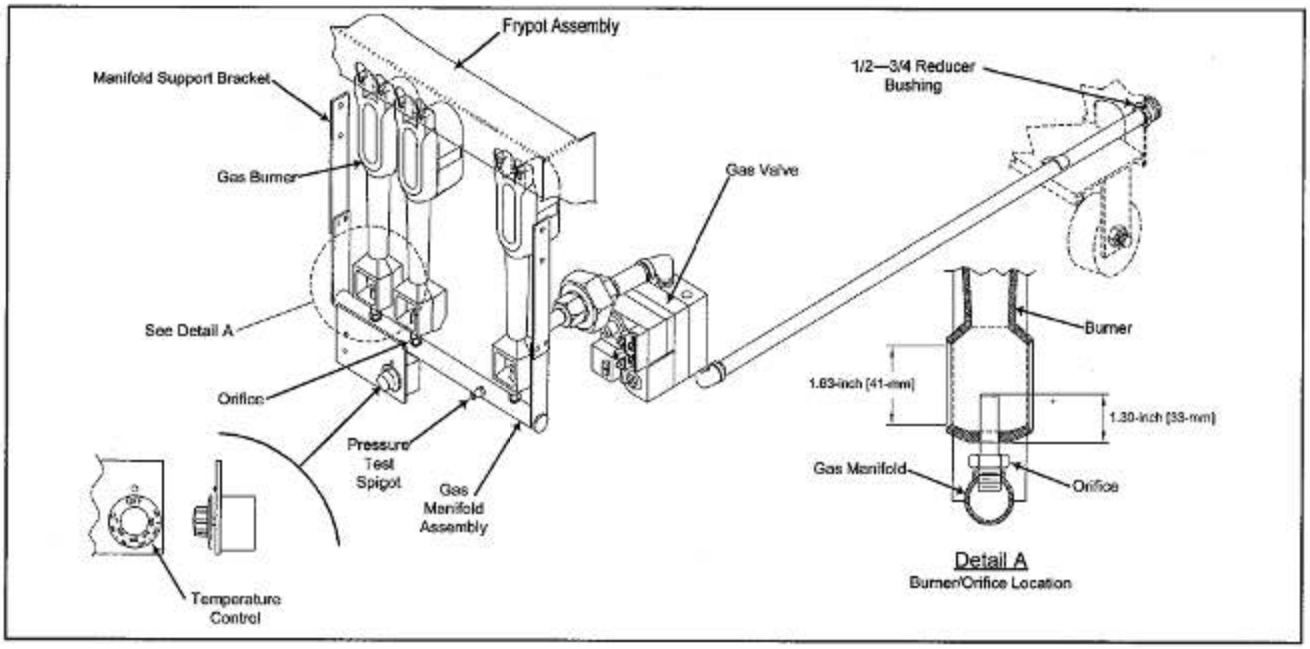
- Burner orifices and pilot orifice **MUST** be replaced (see page 1-6 for required component part numbers).
- Adjust orifice gas pressure by turning the gas-valve adjustment screw (see page 1-3 for gas types and pressures).
- After adjustment, replace the adjustment-screw cover.
- Affix the new label included with the conversion kit next the existing rating plate stating that the gas type has been converted. Remove any references to the previously used gas from the existing rating plate.

Conversion from one gas family to another (i.e. changing from natural gas to propane) requires special components. Obtain the necessary components using the table on page 1-6.

Conversions can only be executed by qualified, factory-authorized personnel.



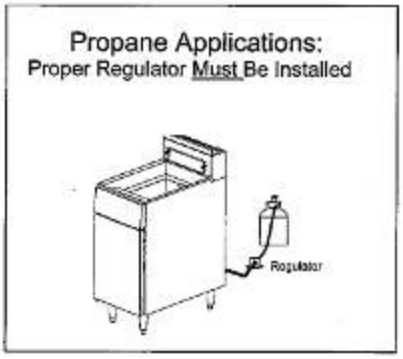
Typical Non-CE Gas Valve **Typical CE Gas Valve**



Typical gas valve, burner and orifice locations (SR42 shown above).

1.6 Gas Conversion Components

Use the following components to convert from natural gas to propane and vice-versa. See Section 1.5 for orifice quantities required for conversion.



Natural Gas to Propane Kit. 826-1817	Propane To Natural Gas Kit, 826-2017
Bushing, NPT Flush, SR 42 series only	Bushing, NPT Flush, SR 42 series only
Pilot Orifice (16LP) **CE & Non-CE**	Pilot Orifice (26N) **CE & Non-CE**
Burner Orifice, 1.51mm- **CE ONLY**: *All Super Runner Series*	Burner Orifice, 2.40mm- **CE ONLY**: *All Super Runner Series*
Burner Orifice, 1.51mm (#53)- **NON-CE ONLY**: *SR52 & SR62 Series Only*	Burner Orifice, 2.53mm (#39)- **NON-CE ONLY**: *SR52 & SR62 Series Only*
Burner Orifice, 1.70mm (#51)- **NON-CE ONLY**: *SR42 Series Only*	Burner Orifice, 2.80mm (#35)- **NON-CE ONLY**: *S42 Series Only*
Rating label, contact factory at time of conversion	Rating label, contact factory at time of conversion
* Burner orifices listed above are for fryers operating at altitudes of 2000 feet (610 meters) or less. For altitudes greater than 2000 feet (610 meters), contact the factory for the correct orifice size.	

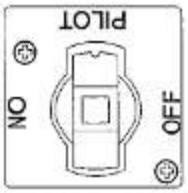
2.1 Initial Startup

Wash the unit and accessories thoroughly with hot, soapy water to remove any film residue, dust or debris. Rinse and wipe dry. Close the drain valve completely. Ensure the operating thermostat and high-limit thermostat sensing bulbs inside the frypot are securely seated in the holding clamp.

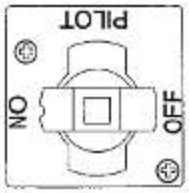
2.1.1 Operating the Gas Valve

NON-CE UNITS ONLY:

Rotate the knob counter-clockwise to the ON or PILOT positions. Depress and rotate the knob clockwise to turn the valve OFF.



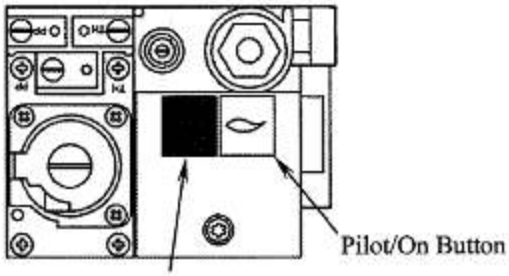
PILOT Position



ON Position

CE UNITS ONLY:

Depress white button to light pilot and turn gas valve on. Depress red button to turn the valve off.



2.1.2 Pilot Lighting Procedures

NOTE: This fryer was tested, adjusted and calibrated to sea level conditions before leaving the factory. Adjustments may be necessary to meet local conditions, and are to be performed only by qualified service personnel. Adjustments are the responsibilities of the customer or dealer and are not covered by Dean warranty.

The pilot is located high in the cabinet center, at the base of the frypot. Use a long match or taper to light the pilot. Perform the following steps in sequence before lighting the pilot:

NON-CE UNITS ONLY:

1. Turn off the manual shut-off valve on the incoming gas supply line.
2. Turn the operating thermostat to the OFF position.
3. Depress and turn the gas valve knob to the OFF position.
4. Wait at least 5 minutes for any accumulated gas to disperse.

5. Fill the frypot with oil, shortening or water to the bottom OIL LEVEL line scribed on the frypot back. Ensure heating tubes are covered in liquid prior to engaging burners.

   NOTE: If solid shortening is used, pack the shortening into the frypot, ensuring the shortening is packed beneath, between and above the tubes prior to operating fryer.

6. Open the manual shut-off valve on the incoming gas supply line and rotate the gas valve knob to the PILOT position.
7. Push and hold the knob in and apply a lighted match or taper to the pilot burner head. Continue to hold the knob in for about 60 seconds after the flame appears on the pilot. Release the knob. The pilot should remain lit.

⚠ DANGER
If the pilot fails to remain lit, turn the gas valve "OFF" and wait 5 minutes before attempting to re-light.

CE UNITS ONLY:

1. Ensure that the following steps are done in sequence before lighting or re-lighting the pilot:
2. Turn off the manual shut-off valve on the incoming service line.
3. Turn the operating thermostat "OFF".
4. Depress the red button on the safety control valve to turn "OFF".
5. Wait at least 5 minutes for any accumulated gas to disperse.
6. Fill the frypot with oil, shortening or water to the bottom OIL LEVEL line scribed on the frypot back. Ensure heating tubes are covered in liquid prior to engaging burners.

   NOTE: If solid shortening is used, pack the shortening into the frypot, ensuring the shortening is packed beneath, between and above the tubes prior to operating fryer.

7. Open the manual shut-off valve on the incoming service line.
8. Apply a lighted match or taper to the pilot burner head. (If fryer is equipped with a piezo ignitor, go to Step 9).
9. Press the white button on the gas valve and hold approximately 45 seconds to 1 minute, until the pilot stays lit. (If fryer is equipped with a piezo ignitor, press and hold the white button, then repeatedly press the piezo ignitor button until the pilot lights. Release the white button after approximately 45 seconds to 1 minute.)
10. If the pilot does not stay lit, depress the white button and re-light the pilot, holding the button in longer before releasing. Trapped air may necessitate re-lighting the pilot several times until a constant gas flow is attained.
11. When the pilot stays lit, release the white button.

2.1.3 Lighting the Burners

⚠ WARNING
NEVER set a complete block of solid shortening on top of the heating tubes. To do so will damage the heating tubes and frypot, and void the warranty.

1. Ensure the frypot is filled with oil or shortening to the lower of the two oil level lines embossed on the back wall of the frypot. **NOTE:** If solid shortening is used, pack the shortening into the frypot, ensuring the shortening is packed beneath, between and above the tubes prior to operating fryer.

⚠ DANGER
"Dry-firing" the fryer will cause damage to the frypot and can cause a fire. Always ensure that shortening, cooking oil or water covers the burner tubes before lighting the burners.

2. With the pilot lit, push down and slowly turn the gas valve knob to the ON position.

3. Rotate the operating thermostat knob to the desired frying temperature. The burner should light and burn with a strong blue flame.

⚠ DANGER
If the pilot and burners go out, the fryer must be completely shut down at least five minutes before re-lighting.

2.2 Shutting the Fryer Down

For temporary shutdown, turn the operating thermostat to the OFF position and cover the frypot.

For complete shutdown, turn the operating thermostat to the OFF position, turn the gas valve knob to the OFF position (Non-CE) or press the red button (CE) and cover the frypot.

2.3 Daily Operation

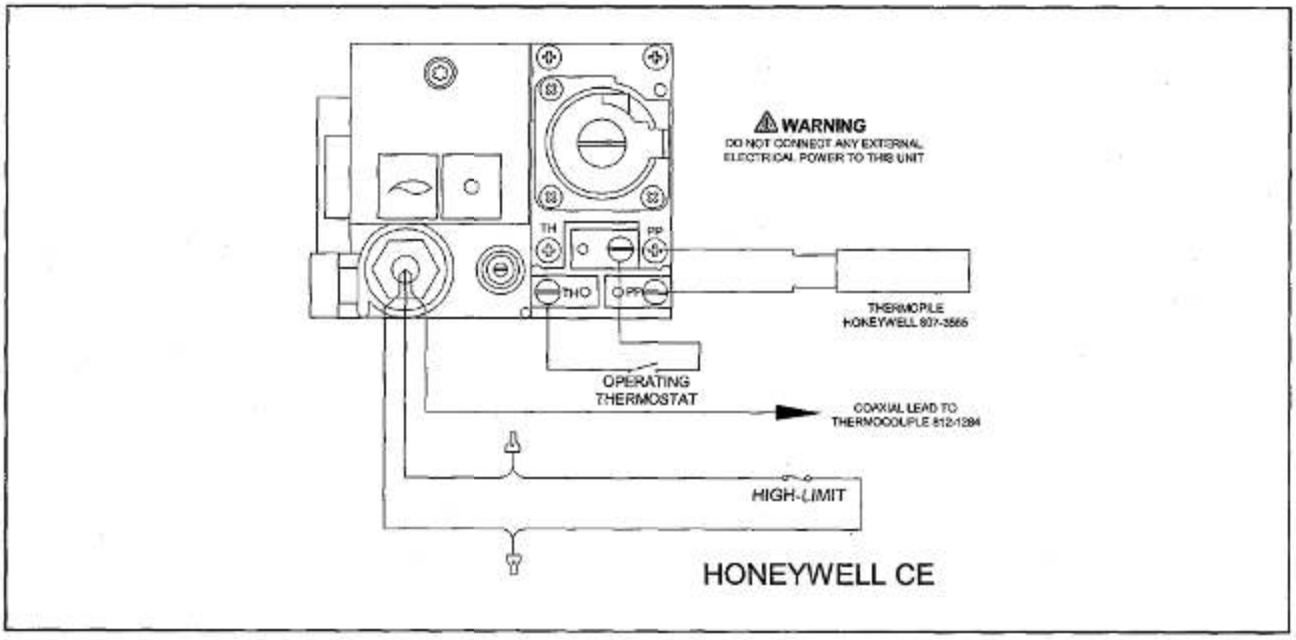
1. Do not allow grease to accumulate or harden on the frame, body, or flue of the fryer. Clean the fryer inside and out with a solution of detergent and hot water daily.
2. Filter the cooking oil by draining the frypot through a filter cone at least daily. After the oil has been drained from the frypot, remove any residue from the pot, using a scraper if necessary.
3. Clean the frypot at least once each week by filling it to just below the upper oil level mark with water. Add one cup of detergent and bring the solution to a boil. Allow the solution to simmer for 10-15 minutes, then drain and rinse the frypot with clean water twice. Add ¼ cup of white vinegar to the last rinse to neutralize any alkalinity remaining from the detergent. Wipe the frypot surfaces with a dry towel before refilling with cooking oil. If the fryer is not to be used immediately after cleaning, it is suggested that the inside of the frypot be wiped down with a light coat of cooking oil to prevent rust.

2.4 Recommended Spare Parts

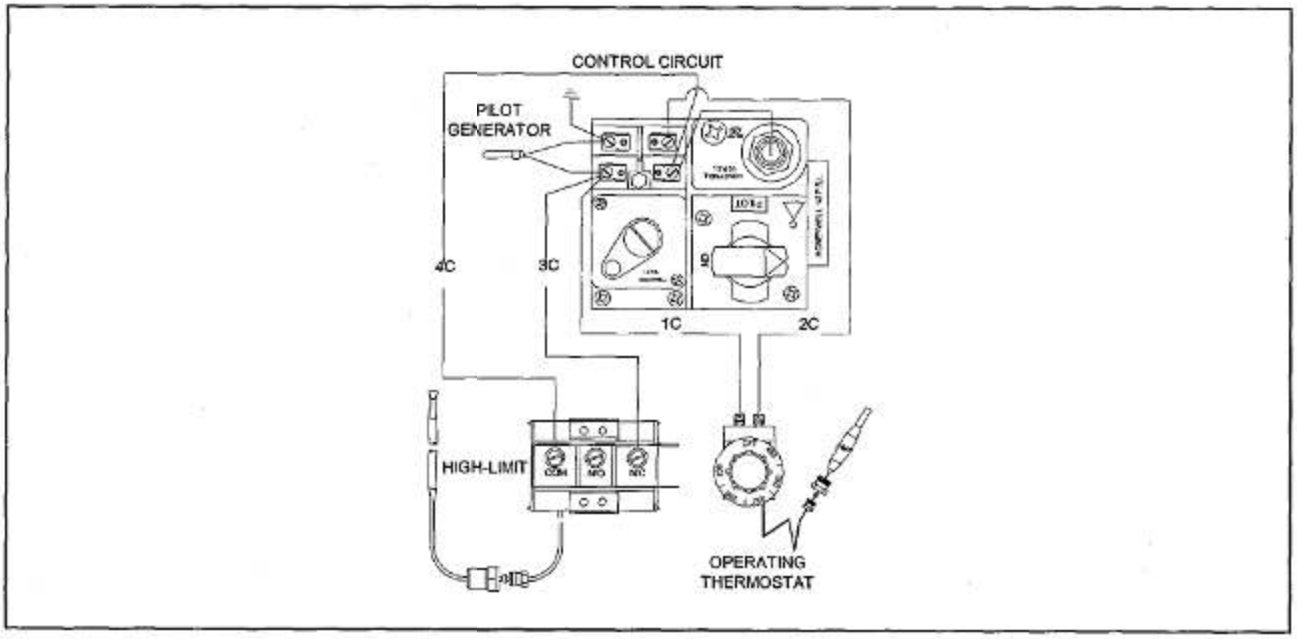
DESCRIPTION	PART # SR42- NON-CE	PART # SR42- CE	PART # SR52/SR62- NON-CE	PART # SR52/SR62- CE
Operating Thermostat	807-3515	807-1692	807-3515	807-1692
High-Limit Thermostat	807-3516	807-3560	807-3680	807-3560
Thermopile	810-2033	807-3565	810-2033	807-3565
Thermocouple	N/A	812-1284	N/A	812-1284
Pilot Burner, Natural Gas	810-2032	810-2032	810-2032	810-2032
Pilot Burner, Propane Gas	810-2155	810-2155	810-2155	810-2155
Pilot Bracket, AGA	N/A	200-6564	N/A	200-6564
Pilot Thermopile Bracket	N/A	810-2401	N/A	810-2401
Piezo Ignitor Trigger	N/A	810-1001	N/A	810-1001
Piezo Ignitor Bracket	N/A	200-1868	N/A	200-1868
Piezo Ignitor Electrode	N/A	807-3540	N/A	807-3540
Orifice, Natural	810-2040	810-2060	810-2048	810-2060
Orifice, Natural, units built after 4/07	810-3097	810-3101	N/A	N/A
Orifice, Propane	810-2064	810-2059	810-2059	810-2059
Orifice, Propane, units built after 4/07	810-3099	810-3102	N/A	N/A
Gas Valve, Natural	807-1603	807-2122	807-1603	807-2122
Gas Valve, Propane	807-1604	807-2121	807-1604	807-2121
Leg	810-2053	810-2053	810-2053	810-2053
Caster, 5-inch w/o Brake	810-0356	810-0356	810-0356	810-0356
Caster, 5-inch w/Brake	810-0357	810-0357	810-0357	810-0357

2.5 Wiring Diagram

CE UNITS ONLY:



NON-CE UNITS ONLY:



OFFICE USE ONLY

DATE:	COMMENTS:	INITIALS:
	fill out front of packet	
	" " Zoning application	
	Survey of property	
	Spec sheets for mechanicals	
8-15-13	called Contractor - permit ready for pick up	JD
10/2/13	called Contr. - permit ready for pick up	JD

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	SC	6/17/13							ZA-13-00757
☐ 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		Other	
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.				