BLOCK 1430.04 LOT 7 QUALIFICATION CODE ______ ADDRESS (SITE) 13 Jeffrey Lane PERMIT NO. 13-387

CONSTRUCTION PERMIT APPLICATION

New Jersey Uniform Construction Code

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII 013-004880

I. IDENTIFICATION

1. Proposed Work Site at: 13 Jeffrey Ln. Brick 08724
2. Name of Owner in Fee: Robert Moen
   Tel. [redacted] e-mail ______
   Address 13 Jeffrey Ln (street) Brick (municipality) 08724 (zip code)
3. Ownership in Fee: Public ______ Private ______
4. Principal Contractor: Blue Ridge Heating & Cooling Tel. (732) 341-5744
   Address 200 Grant Ave Pine Beach NJ 08741 e-mail jen@blueridgehvac.com
   License No. OR, if new home, Builder Reg. No. ______ Exp. Date 12/13
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13HV00148400
   Federal Emp. ID No. 222-870-398 Fax: (732) 473-1018
5. Architect or Engineer ______ Contact ______
   Address ______ e-mail ______
   Tel. ( ) ______ Fax: ( ) ______
6. Responsible Person in Charge once Work has Begun ______
   Tel. (732) 341-5744 Fax: (732) 473-1018

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$		
2.	Electrical	40		
3.	Plumbing	50		
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal			
7.	Less 20% for State Plan Review	$		
8.	Subtotal	$		
9.	State Permit Surcharge Fee	5		
10.	Subtotal	$		
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$ 95		

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 Structure ______ 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 ____

IIa. PROPOSED WORK

☐ 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)

Subcode	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	8-26-13						
☒ Electrical					9/3/13	JS.			
☒ Plumbing					8-29-13	8/			
☐ Fire Protection									
☐ Elevator									
TOTAL COST	3000								

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 System
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LP Gas Tanks

Emerg. Replacement of ductless heat pump not due to storm 2011

U.C.C. F100-1 (rev. 12/07)

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 09/26/2013
Control Number C-13-004886
Permit Number 13-3874
Permit Issue Date 09/10/2013
Certificate Number 13-3874

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 13 JEFFERY LN Brick Township, NJ Block: 1430.04 Lot: 7 Qual:

Owner in Fee: MOEN, ROBERT E. & VICKI E.HONG MOEN

Owner Address: 13 JEFFERY LANE BRICK NJ 08724

Telephone:

Contractor BLUE RIDGE HEATING & COOLING

Address 200 GRANT AVENUE Pine Beach NJ 08741

Telephone: (732) 341-5744 Fax: (732) 473-1018

License Number or Builders Registration Number: 13VH00148400 Federal Emp. Number: 22-2780398

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: HEAT PUMP

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:

called 9.3.13 JD

CONSTRUCTION PERMIT

Date Issued 9/10/13
Control # C-13-004886
Permit # 13-3874

IDENTIFICATION Block: 1430.04 Lot: 7 Qualifier
Work Site Location: 13 JEFFERY LN Brick Township, NJ
Owner in Fee: MOEN, ROBERT E. & VICKI E.HONG MOEN
13 JEFFERY LANE BRICK NJ 08724
Telephone:

Contractor: BLUE RIDGE HEATING & COOLING
Address: 200 GRANT AVENUE Pine Beach NJ 08741
Telephone: (732) 341-5744
Lic. No. or Bldrs. Reg. No. 13VH00148400
Federal Employee. No. 22-2780398

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:
HEAT PUMP

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 $3000

Daniel F. Newman Jr. — Construction Official

9/13/13 — Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$40
Plumbing	$50
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$5
CO Fee	
Other	$0
Total	1335 $95
Check No.	
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.

☑ 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.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received Control # 9/10/13

Date Issued Permit # 13-3874

93

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

Block 1430.04 Lot 7 Qualification Code

Work Site Location 13 Jeffrey Ln.
Brick NJ 08724

Owner in Fee: Robert Moen

Tel. [redacted] e-mail

Address 13 Jeffrey Ln (street) Brick (municipality) 08724 (zip code)

Contractor: Blue Ridge Heating & Cooling Tel. (732) 341-5744

Address 200 Grant Ave. e-mail
Pine Beach NJ 08741

Contractor License No. 13VH00148400 Exp. Date 12/13

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

Federal Emp. ID No. 22-2870398 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 $ 2500

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL for PERMIT
Date: 8-29-13
Approved by: B

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date: 9-19-13
Approved by: B

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			09-18-13 PP	

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: William F Stiebe

Print name here: William F Stiebe

[ ] Licensed Plumbing Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Emergency replacement of ductless heat pump (not storm related)

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	12,000
1	Other Ductless Heat Pump	

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received Control # 9/10/13

Date Issued Permit # 13-3874

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

Block 1430.04 Lot 7 Qualification Code

Work Site Location 13 Jeffrey Ln.
Brick NJ 08724

Owner in Fee: Robert Moen

Tel. [redacted] e-mail

Address 13 Jeffrey Ln (street) . Brick (municipality) 08721 (zip code)

Contractor: Shan Electric Tel. (732) 269-0997

Address 5 Colton Ct. e-mail
Bayville NJ 08721

Contractor License No. 9575 Exp. Date 12/15

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

Federal Emp. ID No. [redacted] FAX: (732) 473-1018

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 500

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[✓] No Plans Required

[ ] Partial - Underslab Utilities Approved
Date: Approved by:

[ ] Electrical Plans Approved
Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plub. [ ] Fire [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 9/3/13
Approved by: JJ

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 9/19/13
Approved by: JJ

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Barrier-Fee				
Trench				
Temp. Srv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			9-18-13	D
Barrier-Fee				
Tem. Cut-In-Card Date Issued				
Final Cut-In-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner and that I am authorized to make this application and perform the work listed on this application.

Applicant's Signature / Contractor's Name and Signature

[✓] Licensed Elec. Contractor [ ] Certif'd Lands Care Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Emergency replacement of ductless heat pump

(not storm related)

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW ELec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1	15A	Ductless Heat Pump	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

U.C.C. F120 (rev. 12/07)

1. White = Inspector Copy 2. Canary = Office copy 3. Pink = Office Copy 4. Gold = Applicant Copy

Single Zone | MSZ Heat Pump

Model Name	Indoor Unit		MSZ-FE09NA-8	MSZ-FE12NA-8	MSZ-FE18NA	MSZ-GE09NA-8	MSZ-GE12NA-8
	Outdoor Unit		MUZ-FE09NA-1	MUZ-FE12NA1	MUZ-FE18NA	MUZ-GE09NA	MUZ-GE12NA
Cooling *1	Rated Capacity	Btu/h	9,000	12,000	18,000	9,000	12,000
	Capacity Range	Btu/h	2,800-9,000	2,800-12,000	8,200-25,200	3,800-12,200	3,800-13,600
	Total Input	W	580 (160-650)	930 (160-960)	1,270 (570-2,280)	660 (205-1,200)	960 (205-1,300)
	Energy Efficiency	SEER	26	23	20.2	21	20.5
	Moisture Removal	Pints/h	2.1	2.9	2.7	1.5	2.5
	Sensible Heat Factor		0.76	0.73	0.84	0.82	0.74
Heating at 47° F *2	Rated Capacity	Btu/h	10,900	13,600	21,600	10,900	14,400
	Capacity Range	Btu/h	3,000-18,000	3,000-21,000	7,500-29,700	4,500-14,100	5,500-18,100
	Total Input	W	710 (150-2,250)	950 (150-2,250)	1,540 (520-2,240)	760 (255-1,200)	1,170 (340-1,660)
	HSPF (IV)	Btu/h/W	10	10.5	10.3	10	
Heating at 17° F *3	Rated Capacity	Btu/h	6,700	7,900	11,700	6,600	8,800
	Rated Total Input	W	650	750	1,240	700	900
	Maximum Capacity	Btu/h	12,500	13,600	21,600	8,700	11,200
Heating at 5° F	Maximum Capacity	Btu/h	10,900	12,500	21,600	7,061	9,194
Power Supply	Phase, Cycle, Voltage		1 Phase, 60Hz, 208/230V *4				
Voltage	Indoor - Outdoor S1 - S2		AC 208 / 230V				
	Indoor - Outdoor S2 - S3		DC12-24				
	Indoor - Remote Controller		Wireless Type (Optional Wired Controller: DC12V)				
Indoor Unit	MCA	A	1.0				
	Fan Motor	F.L.A.	0.76				
	Airflow at Cooling (Lo-Med-Hi-Super HI-Powerful) *1	DRY (CFM)	162-226-339-381	162-226-381-410	388-469-628-738	145-170-237-321-399	145-170-237-321-399
		WET (CFM)	144-202-307-343	144-202-350-367	347-420-562-661	109-134-201-286-364	109-134-201-286-364
	Airflow at Heating (Lo-Med-Hi-Super HI-Powerful) *2	WET (CFM)	166-240-367-381	166-240-399-420	388-469-628-738	145-170-237-321-406	145-170-237-321-406
	Sound Pressure Level at Cooling (Lo-Med-Hi-Super HI-Powerful) *1	dB(A)	22-31-39-42	22-33-43-45	34-41-49-53	19-22-30-37-43	19-22-30-37-45
	Sound Pressure Level at Heating (Lo-Med-Hi-Super HI-Powerful) *2	dB(A)	22-31-40-42	22-33-43-44	32-41-49-52	19-22-30-37-43	19-22-30-37-43
	External Finish Color		Munsell No. 1.0Y 9.2 / 0.2				
	Dimension Unit	W: In.	31-3/8		43-5/16	31-7/16	
		D: In.	10-1/8		9-3/8	9-1/8	
		H: In.	11-5/8		12-13/16	11-5/8	
	Weight Unit	Lbs.	27		37	22	
	Field Drainpipe Size O.D.	In.	5/8				
Remote Controller	Type		Hand-held Wireless Remote Controller (Optional MHK1 Backlit Wireless Wall-mounted Remote Controller)				
Outdoor Unit	MCA	A	12		17.1	12	
	MOCP	A	15		20	15	
	Fan Motor	F.L.A.	0.56		0.93	0.50	
	Compressor	Model (Type)	DC INVERTER-driven Twin Rotary			DC INVERTER-driven	
		R.L.A.	8.6		12.9	6.6	
		L.R.A.	10.8		16.1	8.2	
	Airflow (Cooling/Heating)	CFM	1,102 / 1,187		1,769 / 1,701	1,151 / 1,225	1,229 / 1,172
	Refrigerant Control		Linear Expansion Valve				
	Defrost Method		Reverse Cycle				
	Sound Pressure Level at Cooling *1	dB(A)	48		55	46	49
	Sound Pressure Level at Heating *2	dB(A)	49		55	50	51
	External Finish Color		Munsell No. 3Y 7.8 / 1.1				
	Dimensions	W: In.	31-1/2		33-1/16	31-1/2	
		D: In.	11-1/4		13	11-1/4	
		H: In.	21-5/8		34-5/8	21-5/8	
	Weight	Lbs.	80		119	66	77
Refrigerant	Type		R410A				
	Charge	Lbs., Oz.	2, 9		4, 3	1, 12	2, 9
	Oil	Type (fl. oz.)	NE022 (15.2)		FV50S (13.5)	NE022 (10.8)	
Refrigerant Pipe	Gas Side O.D.	In.	3/8		5/8	3/8	
	Liquid Side O.D.	In.	1/4		3/8	1/4	
Refrigerant Pipe Length	Height Difference (Max.)	Ft.	40		50	40	
	Length (Max.)	Ft.	65		100	65	
Connection Method	Indoor/Outdoor		Flared/Flared				

NOTES: Test conditions are based on AHRI 210/240.
*1. Rating conditions (cooling)-Indoor: D.B. 80° F (27° C), W.B. 67° F (19° C); Outdoor: D.B. 95° F (35° C), W.B. 75° F (24° C).
*2. Rating conditions (heating)-Indoor: D.B. 70° F (21° C), W.B. 60° F (16° C); Outdoor: D.B. 47° F (8° C), W.B. 43° F (6° C).
*3. Rating conditions (heating)-Indoor: D.B. 70° F (21° C), W.B. 60° F (16° C); Outdoor: D.B. 17° F (-8° C), W.B. 15° F (-9° C).
*4. Indoor units receive power from outdoor units through field-supplied interconnected wiring.
Specifications are subject to change without notice.

LIMITED WARRANTY | Seven-year warranty on compressor. Five-year warranty on parts.

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

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

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

HAS REGISTERED

Blue Ridge Heating & Cooling Inc
William Stueber
200 Grant Ave
Pine Beach NJ 08741

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

11/12/2012 TO 12/31/2013
VALID

13VH00148400
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs
HAS REGISTERED
Blue Ridge Heating & Cooling Inc
Home Improvement Contractor

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

11/12/2012 TO 12/31/2013
VALID

SIGNATURE

13VH00148400
License/Registration/Certificate #

ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/ CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:

Division of Consumer Affairs
P.O. Box 46016
Newark, NJ 07101

PLEASE DETACH HERE

BlueRidge Heating&Cooling

200 Grant Avenue
Pine Beach, NJ 08741
732-341-5744
www.BlueRidgeHVAC.com

Lot: 1430.04

Block: 7

Name: Robert Moen

Address: 13 Jeffrey Ln Brick 08724

To Whom It May Concern:

We are replacing an existing ~~gas furnace/boiler~~ ductless heat pump 12,000 btus with a

12,000 btus gas ~~furnace/boiler.~~ ductless heat pump

We are replacing an existing _____ tons condenser and coil/air handler with a

_____ tons condenser and coil/air handler.

If you have any questions please do not hesitate to contact us at 732-341-5744 or fax at 732-473-1018.

Sincerely,

Bill Stueber
President

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.

(X) Check if contractor.

Agent Name BLUE RIDGE HEATING & COOLING, INC.

Address 200 Grant Avenue
Pine Beach, NJ 08741
1-800-431-HEAT
www.blueridgehvac.com

Telephone (732) 341-5744

Signature _____

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