BLOCK 12360 LOT 4 QUALIFICATION CODE 164885 ADDRESS (SITE) 5 Yardley Manor PERMIT NO. 2019-1268

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

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

I. IDENTIFICATION

1. Proposed Work Site at: 5 Yardley Manor Dr.
2. Name of Owner in Fee: [redacted]
   Tel. [redacted]
   Address 5 Yardley Manor Drive Matawan NJ 07747
   street municipality zip code
3. Ownership in Fee: Public ____ Private ____
4. Principal Contractor: Arctic Air Conditioning Tel. (732) 251-1111
   Address 1 Pleasant Valley Road e-mail ____
   Old Bridge, NJ 08857
   License No. OR, if new home, Builder Reg. No. 13VH01741400 Exp. Date 12/31
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): ____
   Federal Emp. ID No. 22-2195279 FAX: (732) 251-1147
5. Architect or Engineer ____ Contact ____
   Address ____ e-mail ____
   Tel. (____) ____ FAX: (____) ____
6. Responsible Person in Charge once Work has Begun Michael Buonadonna
   Tel. (732) 251-1111 FAX: (732) 251-1147

V. FEE SUMMARY (for office use only)

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

$150

Closed

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 ____

2857 00035_029210 20191268 SF *00OOTBKI*

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)

- ☐ Building
- ☑ Electrical
- ☑ Plumbing
- ☐ Fire Protection
- ☐ Elevator

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
TOTAL COST 4,000								

As per NJAC 5:23-2.17A Minor work no plan review required
TACO:
APR 01 2019

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, including such certification as the construction official may require, have been given or will be given prior to pemit issuance.

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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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 **Arctic Air Conditioning**

Address **1 Pleasant Valley Road**

Old Bridge, NJ 08857

Telephone **(732) 251-1111**

Signature **Michael Buonadonna** MBuonadonna

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ( ) HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

CERTIFICATE

NEW JERSEY UNIFORM CONSTRUCTION CODE

Permit # p2019-1268
Date Issued 05/01/2019
- or -
Control # 164885
Certificate Issued Date: 05/24/2019

IDENTIFICATION

Block 12360 Lot 4 Qualification Code

Work Site Location 5 YARDLEY MANOR DR (AC) , MATAWAN NJ 07747

Owner in Fee [redacted]

Address 5 YARDLEY MANOR DR , MATAWAN NJ 07747

Tel. [redacted]

Contractor ARCTIC AIR Arctic Air Conditioning

Address 1 PLEASANT VALLEY ROAD , OLDBRIDGE NJ 08857

Tel. (732) 251-1111 FAX

Lic. No. or Bldrs. Reg. No.

Federal Employer No. 222195279

Home Warranty No.

Type of Warranty Plan: [ ] State [ ] Private

Use Group R-5

Maximum Live Load

Construction Classification 5B

Maximum Occupancy Load

Description of Work/Use:
Air Conditioning - direct replacement, Air Conditioning - direct replacement, electrical work:

☐ **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 the inspection.

☐ **TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE**

If this is a temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____ or will be subject to fine or order to vacate:

☐ **CERTIFICATE OF CLEARANCE — LEAD ABATEMENT 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, 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 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.

☐ **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 _____.

CONSTRUCTION OFFICIAL DATE

Fee $ 158.00
Paid [✓] Check No. 1020
Collected by: Jeanann Bergamo,Susan Herzig

U.C.C. F260
(rev. 8/05)

1 WHITE — APPLICANT 2 CANARY — OFFICE 3 PINK — TAX ASSESSOR

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 04/04/2019
Control # 164885
Date Issued 05/01/2019
Permit # p2019-1268

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

Block 12360 Lot 4 Qualification Code

Work Site Location 5 YARDLEY MANOR DR (AC) , MATAWAN NJ 07747

Owner in Fee: [redacted]

Tel. [redacted] e-mail

Address 5 YARDLEY MANOR DR , MATAWAN NJ 07747
street municipality zip code

Contractor: A MAY ELECTRIC A MAY ELECTRIC Tel. (609) 208-9624

Address 25 CARRS TAVERN RD, CLARSKBURG NJ 08510 e-mail JESSICAC@ARCTICAC.COM

Contractor License No. 34EB00738100 Exp. Date 03/31/2021

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 223026988 FAX:

B. ELECTRICAL CHARACTERISTICS

Use Group Present R-5 Proposed

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

Building Occupied as Residential Utility Co.

Est. Cost of Elec. Work $ 200

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 5/24/19
Approved by: Brent Taylor

INSPECTIONS Type:	Failure	Failure	Approval	Initial
		Dates (Month/Day)		
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			05/23/19	RLH
Barrier-Free				
Temp. 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 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:

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Air Conditioning - direct replacement, electrical work:

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	

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$ 90.00

U.C.C. F120 (rev. 11/09)
Internet version

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 04/04/2019
Control # 164885

Date Issued 05/01/2019
Permit # p2019-1268

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

Block 12360 Lot 4 Qualification Code _____

Work Site Location 5 YARDLEY MANOR DR (AC) , MATAWAN NJ 07747

Owner in Fe [redacted]

Tel. [redacted] e-mail _____

Address 5 YARDLEY MANOR DR , MATAWAN NJ 07747
street municipality zip code

Contractor: ARCTIC AIR Arctic Air Conditioning Tel. (732) 251-1111

Address 1 PLEASANT VALLEY ROAD, OLDBRIDGE NJ 08857 e-mail JESSICAC@ARCTICAC.COM

Contractor License No. _____ Exp. Date 12/31/2019

Home Improvement Contractor Registration No. or Exemption Reason 19HC00100600

Federal Emp. ID No. 222195279 FAX: _____

B. PLUMBING CHARACTERISTICS

Use Group Present R-5 Proposed _____

Building Sewer Size _____ Public Sewer _____ Private Septic _____

Water Service Size _____ Public Water _____ Private Well _____

Est. Cost of Plumbing Work $ 3800

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: _____
Approved by: _____

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 5/23/19
Approved by: [signature]

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			5/23/19	
Final				

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: _____

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Air Conditioning - direct replacement

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 _____	
	Other _____	

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$ 60.00

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

CONSTRUCTION PERMIT

Date Issued 05/01/2019

Permit # p2019-1268

IDENTIFICATION Block 12360 Lot 4 Qualification Code

Work Site Location 5 YARDLEY MANOR DR (AC) , MATAWAN NJ 07747

Owner in Fee [redacted]

Address 5 YARDLEY MANOR DR , MATAWAN NJ 07747

Tel. ([redacted]

Contractor ARCTIC AIR Arctic Air Conditioning

Address 1 PLEASANT VALLEY ROAD , OLDBRIDGE NJ 08857

Tel. ( ) (732) 251-1111

Lic. No. or Bldrs. Reg. No.

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:

Air Conditioning - direct replacement, electrical work: Air Conditioning - direct replacement

NOTE: If construction 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 $ 4000

Construction Official

5/3/19
Date

PAYMENTS (Office Use Only)

Building	
Electrical	90.00
Plumbing	60.00
Fire Protection	
Elevator Devices	
Other	
DCA State Permit Fee	8.00
Cert. of Occupancy	
Other	
Total	158.00
Check No.	1020
Cash	
Collected by	Jeanann Bergamo,Susan

(see reverse side)

U.C.C. F170 (rev. 01/04)

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

164885 Date Received / Control #

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 12360 Lot 4 Qualification Code

Work Site Location 5 Yardley Manor Dr

Owner [redacted]

Tel [redacted] e-mail

Address same
street municipality zip code

Contractor: A. May Electric Inc. Tel. (609) 208-9624

Address 25 Carrs Tavern Road e-mail
Clarksburg, NJ 08510-1505

Contractor License No. 7381A Exp. Date 3/31/~~16~~ 21

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

Federal Emp. ID No. 223026988 FAX: (609) 208-9624

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as now Utility Co.

Est. Cost of Elec. Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Electric Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date:
Approved by: TACO:

As per NJAC 5:23-2.17A Minor work No T&D review required

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS

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

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification APR 01 2020

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: Alan May

Print name here: **Alan May**

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: PPL AC

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	
1	8.5	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	

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

PLUMBING SUBCODE
TECHNICAL SECTION

164885

Date Received
Control #

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 12360 Lot 4 Qualification Code

Work Site Location 5 Yardley manor Dr matawan nj 07747

Owner in Fee: [redacted]

Tel. [redacted] ail

Address Same
street municipality zip code

Contractor: Arctic Air Conditioning Tel. (732) 251-1111

Address 1 Pleasant Valley Road e-mail

Old Bridge, NJ 08857

Contractor License No. 19HC00100600 Exp. Date 6/30/2020

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH01741400

Federal Emp. ID No. 22-2195279 FAX: (732) 251-1147

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 $ 3800

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:
Approved by: As per NJAC 5:23-2.17A minor work

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CA TCO: [ ] CA
Date:
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				

No plan review required

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: Ross Albert

Print name here: **Ross Albert**

[x] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
RPI AC

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	
1	~~Stacks~~ AC	
	Other	

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

RECEIVED
APR 01 2019

U.C.C. F130 (rev. 11/09)

To reorder call:
Allegra Marketing, Print & Mail
609-390-1400

SPECIFICATIONS

General Data	Model No.	All Regions	---	---	---	---	ML14XC1-041
		North / South Regions	ML14XC1S018	ML14XC1S024	ML14XC1S030	ML14XC1S036	---
		Southwest Region	ML14XC1-018	ML14XC1-024	ML14XC1-030	ML14XC1-036	---
		Nominal Tonnage	1.5	2	2.5	3	3.5
	Indoor Unit Expansion Valve (TXV) (If needed)		12J18	12J18	12J18	12J19	12J20
	RFCIV Metering Orifice Usage		0.052	0.060	0.060	0.071	N/A
Connections (sweat)	Liquid line o.d. - in.		3/8	3/8	3/8	3/8	3/8
	Suction line o.d. - in.		3/4	3/4	3/4	7/8	7/8
[1] Refrigerant (R-410A) furnished			4 lbs. 9 oz.	4 lbs. 9 oz.	5 lbs. 8 oz.	7 lbs. 1 oz.	9 lbs. 0 oz.
Outdoor Coil	Net face area sq. ft.	Outer coil	13.22	16.33	21.00	16.33	21.00
		Inner coil	---	---	---	15.75	20.25
	Tube diameter - in.		5/16	5/16	5/16	5/16	5/16
	Number of rows		1	1	1	2	2
	Fins per inch		26	26	26	22	22
Outdoor Fan	Diameter - in.		18	22	22	22	22
	Number of blades		3	3	3	3	3
	Motor hp		1/10	1/6	1/6	1/6	1/6
	Cfm		2290	3160	3160	3160	3050
	Rpm		1075	825	825	825	825
	Watts		160	215	215	190	190
Shipping Data - lbs. 1 package			134	152	169	175	192

ELECTRICAL DATA

	Line voltage data - 60 hz - 1ph		208/230V	208/230V	208/230V	208/230V	208/230V
	[2] Maximum overcurrent protection (amps)		20	25	25	30	30
	[3] Minimum circuit ampacity		11.9	14.6	17	18	19.3
Compressor	Rated load amps		9.0	10.9	12.8	13.6	14.7
	Locked rotor amps		48	59.3	67.8	79	75
	Power factor		0.97	0.97	0.97	0.96	0.96
Condenser Fan Motor	Full load amps		0.7	1	1	1	1
	Locked rotor amps		1.3	1.9	1.9	1.9	1.9

OPTIONAL ACCESSORIES - ORDER SEPARATELY

Compressor Crankcase Heater		93M04	•	•	•	•	
		Factory					•
Compressor Hard Start Kit	Copeland	10J42	•	•	•		
	LG	88M91	•	•	•	•	•
Compressor Low Ambient Cut-Off Switch		45F08	•	•	•	•	•
Compressor Sound Cover		69J03	•	•	•	•	•
Compressor Time-Off Control		47J27	•	•	•	•	•
Freezestat	3/8 in. tubing	93G35	•	•	•	•	•
	5/8 in. tubing	50A93	•	•	•	•	•
Indoor Blower Off Delay Relay		58M81	•	•	•	•	•
Loss of Charge Switch Kit		84M23	•	•	•	•	•
[4] Low Ambient Kit (Fan Cycling)		34M72	•	•	•	•	•
Refrigerant Line Sets	L15-41-20, L15-41-30, L15-41-40, L15-41-50		•	•	•		
	L15-65-30, L15-65-40, L15-65-50					•	•
Unit Stand-Off Kit		94J45	•	•	•	•	•

NOTE - Extremes of operating range are plus 10% and minus 5% of line voltage.

[1] Refrigerant charge sufficient for 15 ft. length of refrigerant lines. For longer line set requirements see the Installation Instructions for information about line set length and additional refrigerant charge required.

[2] HACR type circuit breaker or fuse.

[3] Refer to National or Canadian Electrical Code manual to determine wire, fuse and disconnect size requirements.

[4] Crankcase Heater and Freezestat are recommended with Low Ambient Kit.

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

H&P AIR CONDITIONING, INC. DBA ARCTIC AIR CONDITIONING
Howard Albert
1 Pleasant Valley Road
Old Bridge NJ 08857

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

03/01/2018 TO 03/31/2019
VALID

Howard Albert
Signature of Licensee/Registrant/Certificate Holder

13VH01741400
LICENSE/REGISTRATION/CERTIFICATION #

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
H&P AIR CONDITIONING, INC. DBA ARCTIC AIR CONDITIONING
Home Improvement Contractor;

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE
03/01/2018 TO 03/31/2019
VALID
SIGNATURE
13VH01741400
License/Registration/Certificate #
ACTING DIRECTOR

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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

APR 01 2019

BACKGROUND AND MULTIPLE SECURITY FEATURES AS SHOWN

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 HVACR Contractors

HAS LICENSED

Ross A. Albert
1 Pleasant Valley Road
Old Bridge NJ 08857

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

05/17/2018 TO 06/30/2020
VALID

Signature of Licensee/Registrant/Certificate Holder

19HC00100600
LICENSE/REGISTRATION/CERTIFICATION #

ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Exam. of HVACR Contractors
HAS LICENSED
Ross A. Albert
Master HVACR Contractor
05/17/2018 TO 06/30/2020
VALID
SIGNATURE
19HC00100600
License/Registration/Certificate #
ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:
Board of Exam. of HVACR Contractors
P.O. Box 47031
Newark, NJ 07101

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APR 01 2019
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BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

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

THIS IS TO CERTIFY THAT THE

Property Detail

New Search | Assessment Postcard

Block:	12360	Prop Loc:	5 YARDLEY MANOR DR	Owner:	[redacted]	Square Ft:	2876
Lot:	4	District:	1215 OLD BRIDGE	Street:	5 YARDLEY MANOR DR	Year Built:	2000
Qual:		Class:	2	City State:	MATAWAN NJ 07747	Style:	2
				Additional Information			
Prior Block:		Acct Num:	08083504	Addl Lots:		EPL Code:	0 0 0
Prior Lot:		Mtg Acct:		Land Desc:	99X122	Statute:	
Prior Qual:		Bank Code:	660	Bldg Desc:	2SF DEVONSHIRE	Initial:	000000 Further: 000000
Updated:	01/28/10	Tax Codes:	F02	Class4Cd:	0	Desc:	
Zone:	R20	Map Page:	1227	Acreage:	0.2773	Taxes:	15014.23 / 0.00
				Sale Information			
Sale Date:	07/01/05	Book:	5526 Page: 333	Price:	675000 NU#: 0		

Srl a	Date	Book	Page	Price	NU#	Ratio	Grantee

TAX-LIST-HISTORY

Year	Owner Information	Land/Imp/Tot	Exemption	Assessed	Property Class
2019	[redacted] 5 YARDLEY MANOR DR MATAWAN NJ 07747	83400 213500 296900	0	296900	2
2018	[redacted] 5 YARDLEY MANOR DR MATAWAN NJ 07747	83400 213500 296900	0	296900	2
2017	[redacted] 5 YARDLEY MANOR DR MATAWAN NJ 07747	83400 213500 296900	0	296900	2
2016	[redacted] 5 YARDLEY MANOR DR MATAWAN NJ 07747	83400 213500 296900	0	296900	2

*Click on Underlined Year for Tax List Page

*Click Here for More History

OFFICE DATE RECEIVED: _____

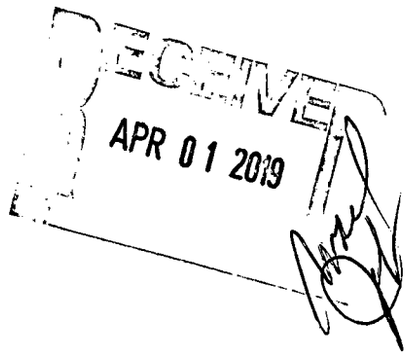
VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning 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.				



email 4/9/19 JL