BLOCK 1192.19 LOT 47 C13-47 QUALIFICATION CODE _____ ADDRESS (SITE) 33 ROSETTI, CT PERMIT NO. 00-0752

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Propsed Work Site at: 33 ROSETTI, ct
2. Name of Owner in Fee: MATTHEWS [redacted]
   Address 33 ROSETTI (street) (municipality) (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: Atlantic Heating Tel. (____) 3678534
   Address 1217 Coronado St Lakewood
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 232746020 FAX: (____) _____
5. Architect or Engineer _____ Tel. (____) _____
   Address _____
6. Responsible Person in Charge of Work GARY PUGO
   Tel. (____) 3678534 FAX (____) _____

3/21/00

Electric To Gas Heat

Left Message

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 35		
2.	Electrical	35		
3.	Plumbing	25		
4.	Fire Protection	46		
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	DCA Training Fee	1		
10.	Subtotal			
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$ 142		

324

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.	Construction Classification	
7.	Total Land Area Disturbed sq. ft.	
8.	Flood Hazard Zone	
9.	Base Flood Elevation ft.	
10.	Wetlands yes	
	no	
11.	Max. Live Load	
12.	Max. Occupancy Load	

II. PROPOSED WORK

		Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1.	☑ Minor Work	200	[illegible]	3/10/00		3-13-00	FH	2/23/04		OK
2.	☐ New Building									
3.	☐ Addition									
4.	☐ Alteration									
5.	☐ Fire Protection					3-21-00	OK			
6.	☐ Plumbing					3/7/00	OK			
7.	☑ Electrical					3/15/00	[illegible]			
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition									
	TOTAL COSTS	200								

OPTIONAL (for office use only)

III. DO YOU WANT: (optional)

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
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☑ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Forme

LDS BR 10302268

U.C.C. F100-1 (rev 3/96)

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(e)1.vii:

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. 5:32-2.15(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.

Agent Name ATLANTIC HEATING & COOLING, INC.

Address 1267 CORONADO ST
LAKEWOOD, NJ 08701

Telephone ( ) 367-8534

Signature _____

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

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. _____	_____	_____	_____	_____

0004
0752#
BLOCK 1192 # 0.00
LOT 47 # 0.00
BUILDING 35.00
ELETRIC# 35.00
PLUMBING 25.00
FIRE 46.00
D.C.A. 1.00
TOTAL 142.00
CHECK 142.00
CHANGE 0.00
NO. 5 0017A005 11:41
03/22/00

UCC NEW JERSEY
CONSTRUCTION
PERMIT

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 03/22/2000
Control #
Permit # 00-0752

IDENTIFICATION Block 1192.19 Lot 47 Qual

Work Site Location 33 ROSETTI CT
ELECTRIC TO GAS
Owner in Fee MATTHEWS
Address SAME
BRICK NJ
Telephone [redacted]

Contractor ATLANTIC HEATING & AIR
Address 1267 CORONADO ST
LAKEWOOD, NJ 08701-
Telephone (732)367-8534
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2746020

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
ELECTRIC TO GAS B-VENT CHIMNEY

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 $ 2,050

Construction Official

03/22/2000
Date

PAYMENTS (Office Use Only)

Building	35
Electrical	35
Plumbing	25
Fire Protection	46
Elevator Devices	0
Other	
DCA Training Fee	1
Cert. of Occupancy	0
Other	
Total	142
Check No. 3261	999
Cash	
Collected By	IL

O.C.C. FIN (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 03/10/2000
Date Issued 3/22/00
Control # C13-47
Permit # 00-0752

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

Block 1192.19 Lot 47 Qual

Work Site Location 33 ROSETTI CT
ELECTRIC TO GAS

Owner in Fee MATTHEWS

Address SAME
BRICK NJ

Tel [redacted]

Contractor ATLANTIC HEATING & AIR

Address 1267 CORONADO ST
LAKEWOOD, NJ 08701-

Tele.(732)367-8534 Fax (732)367-5130

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 23-2746020

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.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

ELECTRIC TO GAS B-VENT CHIMNEY

Check clearances & Combustion Air

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Req	3-13-2000	FP
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date: 2-23-04
Approved By: FP

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final			2/20/04	
BarrierFree				

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	4
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

B. BUILDING CHARACTERISTICS

Use Group Present U Proposed U
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 100
3. Total (1+2)$ 100

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 31
Collected by: TOTAL FEE	$ 35
DCA Training Fee	$ 0

U.C.C. F110 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 03/10/2000
Date Issued 3/21/00
Control # C13-47
Permit # 00-0752

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

Block 1197.19 Lot 47 Qual

Work Site Location 33 ROSETTI CT
ELECTRIC TO GAS

Owner in Fee MATTHEWS

Address SAME
BRICK, NJ

Tele [redacted]

Contractor ATLANTIC HEATING & AIR

Address 1267 CORONADO ST
LAKEWOOD, NJ 08701-

Tele.(732)367-8534 Fax (732)367-5130

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 23-2746020

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an authorized to make this application.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

ELECTRIC TO GAS B-VENT CHIMNEY

Check clearances & Combustion Air

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Req	3-13-2000	fp
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS	Dates (Month/Day) Failure	Failure	Approval	Initial
Type				
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	4
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

B. BUILDING CHARACTERISTICS

Use Group Present U Proposed U
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 100
3. Total (1+2)$ 100

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Paid [ ] Check # Minimum Fee	$ 31
Collected by: TOTAL FEE	$ 35
DCA Training Fee	$ 0

U.C.C. F110 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 03/10/2000
Date Issued 3/22/00
Control # C13-47
Permit # P0-0752

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

Block 1192.19 Lot 47 Qual
Work Site Location 33 ROSETTI CT
ELECTRIC TO GAS
Owner in Fee MATTHEWS
Address SAME
BRICK NJ
Tele. [redacted]
Contractor ATLANTIC HEATING & AIR
Address 1267 CORONADO ST
LAKEWOOD, NJ 08701-
Tele.(732)367-8534 Fax (732)367-5130
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2746020

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.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

ELECTRIC TO GAS 8-VENT CHIMNEY

Check Clearances & Combustion Air

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[X] No Plans Req	3/13/2000	fp
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required:
[ ] Elect [ ] Plumb [ ] Fire
SUBCODE APPROVAL [ ] Elev
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Foundation				
Slab				
Frame				
BarrierFree				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
BarrierFree				

TYPE OF WORK	FEE (Office Use Only)
[ ] New Building	$ 0
[ ] Addition	0
[X] Alteration	4
[ ] Roofing	0
[ ] Siding	0
[ ] Fence 0 Height (exceeds 6')	0
[ ] Sign 0 Sq. Ft.	0
[ ] Pool	0
[ ] Asbestos Abatement Subchapter 8	0
[ ] Lead Haz. Abatement NJAC 5:17	0
[ ] Other	0
Other	0
[ ] Demolition	0

B. BUILDING CHARACTERISTICS

Use Group Present U Proposed U
Constr. Class Present Proposed
No. of Stories 0
Height of Structure 0 Ft.
Area Largest Floor 0 Sq. Ft.
New Bldg. Area/All Floors 0 Sq. Ft.
Volume of New Structure 0 Cu. Ft.
Total Land Area Disturbed 0 Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. $ 0
2. Alteration $ 100
3. Total (1+2)$ 100

Industrialized Building:
[ ] State Approved
[ ] HUD

Administrative Surcharge	$ 0
Minimum Fee	$ 31
TOTAL FEE	$ 35
DCA Training Fee	$ 0

Paid [ ] Check #
Collected by:

U.C.C. P110 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/10/2000
Date Issued 3/22/00
Control # C13-47
Permit # 00-0752

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

Block 1192.19 Lot 47 Qual
Work Site Location 33 ROSETTI CT
ELECTRIC TO GAS
Owner in Fee MATTHEWS
Address SAME
BRICK, NJ
Tele. [redacted] Fax (732)367-5130
Contractor ATLANTIC HEATING & AIR
Address 1267 CORONADO ST
LAKEWOOD, NJ 08701-
Tele.(732)367-8534
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2746020

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 50

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 3 15 00
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
1		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
2		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
1	1	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

Paid [ ] Check #
Collected by:

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 35
DCA Training Fee	$ 0

U.C.C. F120 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/10/2000
Date Issued 3/22/00
Control # C13-47
Permit # 00-0752

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

Block 1192.19 Lot 47 Qual
Work Site Location 33 ROSETTI CT
ELECTRIC TO GAS
Owner in Fee MATTHEWS
Address SAME
BRICK NJ
Tel: [redacted] Fax (732)367-5130
Contractor ATLANTIC HEATING & AIR
Address 1267 CORONADO ST
LAKEWOOD, NJ 08701-
Tele.(732)367-8534
Lic. Go. or Bldrs. Reg. No.
Federal Emp. No. 23-2746020

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 50

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date:
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
1		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
2		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
1	1	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 35
DCA Training Fee $ 0

U.C.C. F120 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/10/2000
Date Issued 3/22/00
Control # C13-47
Permit # 00-0752

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

Block 1192.19 Lot 47 Qual
Work Site Location 33 ROSETTI CT
ELECTRIC TO GAS
Owner in Fee MATTHEWS
Address SAME
BRICK, NJ
Tele [redacted] Fax (732)367-5130
Contractor ATLANTIC HEATING & AIR
Address 1267 CORONADO ST
LAKEWOOD, NJ 08701-
Tele.(732)367-8534
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2746020

B. ELECTRICAL CHARACTERISTICS

Use Group - Present U Proposed U
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 50

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[ ] Elect Plans Approved
Date: 3 15 00
Approved By:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature
[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
1		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
2		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
1	1	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 35
DCA Training Fee $ 0

U.C.C. F120 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 03/10/2000
Date Issued 3/22/00
Control # C13-47
Permit # 00-0752

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

Block 1192.19 Lot 47 Qual
Work Site Location 33 ROSETTI CT
ELECTRIC TO GAS
Owner in Fee MATTHEWS
Address SAME
BRICK, NJ
Tele. [redacted] Fax (732)367-5130
Contractor ATLANTIC HEATING & AIR
Address 1267 CORONADO ST
LAKEWOOD, NJ 08701-
Tele.(732)367-8534
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2746020

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present U Proposed U
Constr Class Present Proposed
Heating Systems [X] New [ ] Existing [ ] HVAC
Type: [X] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location: LAUNDRY ROOM
Total Est Cost of Fire Prot Work $ 1,800

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date: 3-31-00
Approved By: DB
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
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.
Signature

D. TECHNICAL SITE DATA

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Superv

	NUMBER	FEE (Office Use Only)
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	0	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	0	0
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other FURNACE		46
Other		0

- Ck
- Combustion

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	46
DCA Training Fee	$	1

Paid [ ] Check #
Collected by:

U.C.C. F140 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 03/10/2000
Date Issued 3/22/00
Control # C13-47
Permit # 00-0752

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

Block 1192.19 Lot 47 Qual
Work Site Location 33 ROSETTI CT
ELECTRIC TO GAS
Owner in Fee MATTHEWS
Address SAME
BRICK NJ
Tele [redacted] Fax (732)367-5130
Contractor ATLANTIC HEATING & AIR
Address 1267 CORONADO ST
LAKEWOOD, NJ 08701-
Tele.(732)367-8534
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2746020

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present U Proposed U
Constr Class Present Proposed
Heating Systems [X] New [ ] Existing [ ] HVAC
Type: [X] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location: LAUNDRY ROOM
Total Est Cost of Fire Prot Work $ 1,800

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date:
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
Other				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and an authorized to make this application.
Signature

D. TECHNICAL SITE DATA

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Superv

	NUMBER	FEE (Office Use Only)
Storage Tanks		
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	0	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	0	0
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other FURNACE		46
Other		0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	46
DCA Training Fee	$	1

Paid [ ] Check #
Collected by:

U.C.C. F140 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
FIRE PROTECTION
SUBCODE
TECHNICAL SECTION

Date Received 03/10/2000
Date Issued 3/22/00
Control # C13-47
Permit # 00-0752

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

Block 1192.19 Lot 47 Qual
Work Site Location 33 ROSETTI CT
ELECTRIC TO GAS
Owner in Fee MATTHEWS
Address SAME
BRICK, NJ
Tele [redacted] Fax (732)367-5130
Contractor ATLANTIC HEATING & AIR
Address 1267 CORONADO ST
LAKEWOOD, NJ 08701-
Tele.(732)367-8534
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2746020

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present U Proposed U
Constr Class Present Proposed
Heating Systems [X] New [ ] Existing [ ] HVAC
Type: [X] Gas [ ] Oil [ ] Elect [ ] Solar
[ ] Other
Location: LAUNDRY ROOM
Total Est Cost of Fire Prot Work $ 1,800

Fire Alarm System
New [ ] Existing [ ]
Location of Panel:
Fire Suppression/Standpipe Sys
New [ ] Existing [ ]
Location of Main Control Valve

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Plumb [ ] Elevator
[ ] Fire Plans Approved
Date: 3-21-00
Approved By:
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved By:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm Sys				
Suppr Test				
Standpipe				
Fire Pump				
PreEng Sys				
Mechanical				
Smoke Ctl				
TCO				
Final				
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.
Signature

B. TECHNICAL SITE DATA

Description of Work:
Water Supply Source
Method of Alarm/Suppr Sys Superv

Storage Tanks	NUMBER	FEE (Office Use Only)
Type: [ ] Flammable Liquid [ ] Combust Liquid [ ] LPG [ ] LNG Capacity 0 Fuel		
Alarm Systems [ ] 110v Interconnected [ ] System		
Alarm Devices(smoke,heat,pulls,water/flow)	0	
Supervisory Devices (tampers,low/high air)	0	
Signalling Devices (horn/strobes, bells)	0	
Other Devices	0	
TOTAL	0	0
Suppression Systems		
Fire Pump 0 GPM Type	0	
Dry Pipe/Alarm Valves	0	
Pre-action Valves	0	
Sprinkler Heads (Dry and Wet)	0	0
Standpipes	0	0
Pre-Engineered Systems		
Wet Chemical	0	0
Dry Chemical	0	0
CO2 Suppression	0	0
Foam Suppression	0	0
Halon Suppression	0	0
Other		0
Kitchen Hood Exhaust System	0	0
Smoke Control System	0	0
Gas [ ] or Oil [ ] Fired Appliances	0	0
Other FURNACE		46
Other		0

- clearances
- combustion air

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	46
DCA Training Fee	$	1

Paid [ ] Check #
Collected by:

U.C.C. F140 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/10/2000
Date Issued 3/27/00
Control # C13-47
Permit # 00-0752

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

Block 1192.19 Lot 47 Qual
Work Site Location 33 ROSETTI CT
ELECTRIC TO GAS
Owner in Fee MATTHEWS
Address SAME
BRICK NJ
Tele [redacted] Fax (732)367-5130
Contractor ATLANTIC HEATING & AIR
Address 1267 CORONADO ST
LAKEWOOD, NJ 08701-
Tele.(732)367-8534
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2746020

B. PLUMBING CHARACTERISTICS

Use Group Present U Proposed U
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 100

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[X] Plumb. Plans Approved
Date: 3-17-00
Approved By: JJW

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

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.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
0	Water Heater	0
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 25
	DCA Training Fee	$ 0

17'

100,000 BTU

1" thru 3/4

U.C.C. P130 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/10/2000
Date Issued 3/21/00
Control # C13-47
Permit # P-0752

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

Block 1192.19 Lot 47 Qual

Work Site Location 33 ROSETTI CT
ELECTRIC TO GAS

Owner in Fee MATTHEWS

Address SAME
BRICK, NJ

Tele [redacted] Fax (732)367-5130

Contractor ATLANTIC HEATING & AIR

Address 1267 CORONADO ST
LAKEWOOD, NJ 08701-

Tele.(732)367-8534

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 23-2746020

B. PLUMBING CHARACTERISTICS

Use Group Present U Proposed U

Building Sewer Size [ ] Public Sewer [ ] Private Septic

Water Sewer Size [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 100

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[X] Plumb. Plans Approved
Date: 3-17-00
Approved By: JW

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

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

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
0	Water Heater	0
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

	Administrative Surcharge	$ 0
Paid [ ] Check #	Minimum Fee	$ 0
Collected by:	TOTAL FEE	$ 25
	DCA Training Fee	$ 0

17'

100,000 BTU

1" thru 3/4

U.C.C. F130 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/10/2000
Date Issued 3/22/00
Control # C13-47
Permit # 00-0752

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

Block 1192.19 Lot 47 Qual
Work Site Location 33 ROSETTI CT
ELECTRIC TO GAS
Owner in Fee MATTHEWS
Address SAME
BRICK, NJ
Tel [redacted] Fax (732)367-5130
Contractor ATLANTIC HEATING & AIR
Address 1267 CORONADO ST
LAKEWOOD, NJ 08701-
Tele.(732)367-8534
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 23-2746020

B. PLUMBING CHARACTERISTICS

Use Group Present U Proposed U
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 100

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[X] Plumb. Plans Approved
Date: 3-17-00
Approved By: DW

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Approved By:
Date:

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping			3-24-00	DW
Solar				
TCO				

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.

Signature/Contractor Seal
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

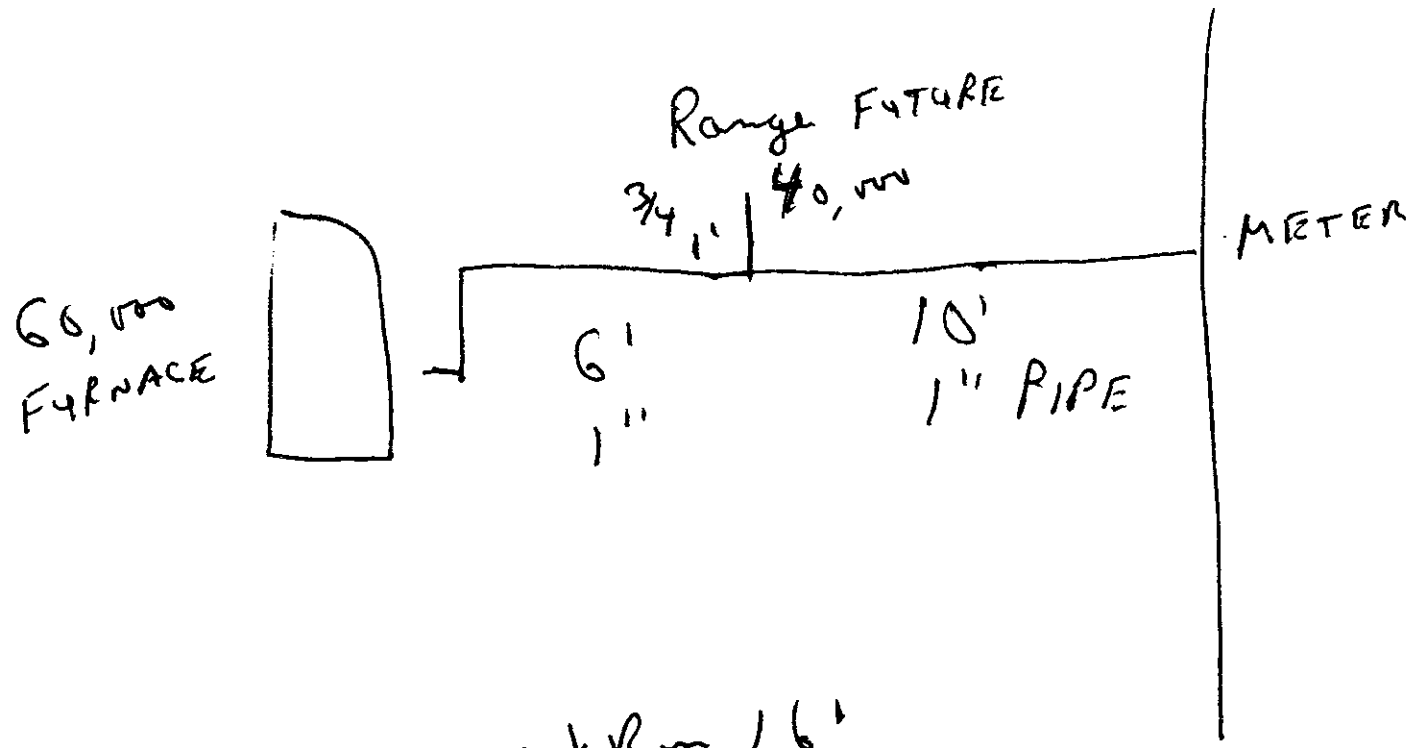
NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
0	Water Heater	0
0	Fuel Oil Piping	0
1	Gas Piping	25
0	Steam Boiler	0
0	Hot Water Boiler	0
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Administrative Surcharge	$	0
Minimum Fee	$	0
TOTAL FEE	$	25
DCA Training Fee	$	0

Paid [ ] Check #
Collected by:

17'
100,000 BTU
1" then 3/4

U.C.C. F130 (rev. 3/96)



Tot Run 16'

33 Rosetti

DN
3-17-00

TUD-C PRODUCT SPECIFICATIONS①

MODEL	TUD040C924B	TUD040C930B	TUD060C924B
RATINGS②			
Input BTUH	40000	40000	60000
Capacity BTUH (ICS)③	31000	32000	47000
AFUE (ICS)	79.1	80.0	79.2
Temp. Rise (Min.-Max.) °F.	30 - 60	30 - 60	35 - 65
BLOWER DRIVE	DIRECT	DIRECT	DIRECT
Dia.-Width (In.)	10 x 6	10 x 6	10 x 6
No. Used	1	1	1
Speeds (No.)	4	4	4
CFM vs. in. w.g.	SEE FAN PERF. TABLE	SEE FAN PERF. TABLE	SEE FAN PERF. TABLE
Motor HP	1/5	1/3	1/5
R.P.M.	1080	1075	1080
Volts/Ph/Hz	115/1/60	115/1/60	115/1/60
COMBUSTION FAN - TYPE	CENTRIFUGAL	CENTRIFUGAL	CENTRIFUGAL
Drive - No. Speeds	DIRECT - 1	DIRECT - 1	DIRECT - 1
Motor HP - RPM	1/50 - 3000	1/50 - 3000	1/50 - 3000
Volts/Ph/Hz	115/1/60	115/1/60	115/1/60
FL Amps	1.0	1.0	1.0
FILTER — Furnished?	YES	YES	YES
Type Recommended	HIGH VELOCITY	HIGH VELOCITY	HIGH VELOCITY
Filter (No.-Size-Thk.)	1 - 16 X 25 X 1 IN.	1 - 16 X 25 X 1 IN.	1 - 16 X 25 X 1 IN.
VENT — Size (In.)	4 ROUND	4 ROUND	4 ROUND
HEAT EXCHANGER			
Type-Fired	ALUMINIZED STEEL TYPE 1	ALUMINIZED STEEL TYPE 1	ALUMINIZED STEEL TYPE 1
-Unfired			
Gauge (Fired)	20	20	20
ORIFICES — Main			
Nat. Gas. Qty. — Drill Size	2 - 44	2 - 44	3 - 44
L.P. Gas Qty. — Drill Size	2 - 55	2 - 55	3 - 55
GAS VALVE	REDUNDANT - SINGLE STAGE	REDUNDANT - SINGLE STAGE	REDUNDANT - SINGLE STAGE
DIRECT IGNITION DEVICE			
Type	HOT SURFACE IGNITOR	HOT SURFACE IGNITOR	HOT SURFACE IGNITOR
BURNERS — Type	IN-SHOT	IN-SHOT	IN-SHOT
Number	2	2	3
POWER CONN. — V/Ph/Hz④	115/1/60	115/1/60	115/1/60
Ampacity (In Amps)	6.3	6.3	10.4
Fuse Size — Max. (Amps)	10	10	15
PIPE CONN. SIZE (IN.)	0.50	0.50	0.50
DUCT CONN.	SEE OUTLINE DRAWING	SEE OUTLINE DRAWING	SEE OUTLINE DRAWING
DIMENSIONS	H X W X D	H X W X D	H X W X D
Crated (In.)	41-3/4 X 16-1/2 X 30-1/2	41-3/4 X 16-1/2 X 30-1/2	41-3/4 X 16-1/2 X 30-1/2
Uncrated	SEE OUTLINE DRAWING	SEE OUTLINE DRAWING	SEE OUTLINE DRAWING
WEIGHT			
Shipping (Lbs.)/Net (Lbs.)	119/110	122/113	124/115

① Central Furnace heating designs are certified by the American Gas Association Inc. Laboratories.
② Ratings shown are for elevations up to 2000 feet. For elevations above 2000 feet; Ratings should be reduced at the rate of 4% for each 1000 feet above sea level.
③ Based on U.S. Government Standard Tests.
④ The above wiring specifications are in accordance with National Electrical Code; however, installations must comply with local codes.

Counter Form
PLEASE PRINT

PLUMBING

ıntractor: ATLANTIC HEATING & COOLING, INC.
ıdress: 1267 CORONADO ST
LAKEWOOD, NJ 08701
ıone #: 367 8537
.s #:
ederal Emp # or SSN 223776020

Technical Data

ixtures — Quantity

Vater Closets
Jrinals/Bidets
3ath Tub
.avatory
Shower
Floor Drain
Sink
Dishwasher
Drinking Fountain
Washing Machine
Hose Bib
Gas Piping 1
Fuel Oil Piping
Water Heater
Steam Boiler
Hot Water Boiler
Sewer Pump
Interceptor/Separator
Backflow Preventer
Greasetrap
Water Cooled A/C or Refrig. Unit
Septic Tank Closure
Sewer Service Connection
Water Service Connection
Active Solar System
Auxiliary Meter
Sprinkler Heads
Sump Pump
Other:

Estimated Cost of Plumbing Work 150

Signature:

Please Print Name: GARY PUCO

CONTRACTOR'S SEAL

FIRE

Contractor: ATLANTIC HEATING & COOLING, INC.
Address: 1267 CORONADO ST
LAKEWOOD, NJ 08701
Phone #: 367 8537
Lis #:
Federal Emp # or SSN 223776020

Technical Data

Description of Work:

Heating Type: ✓ Gas ___ Oil ___ Electric ___ Solar
Heating System is ___ New ✓ Existing
Location of Furnace/Boiler: LAUNDRY

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision:
Proprietary Supervision:

Flammable Storage Tanks ___ capacity ___ fuel
Combustible Storage Tanks ___ capacity ___ fuel
LPG Storage Tanks ___ capacity ___ fuel

Item — Quantity

Wet Sprinkler Heads
Dry Sprinkler Heads
Total

Smoke Detectors
Heat Detectors
Total

Stand Pipes
Kitchen Hood Exhaust System

Pre-Engineered Systems:
CO2 Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical

Gas/ Oil Fired Appliances:
Number of gas/oil fired appliances 1

Furnace 1
Gas/Wood Fireplace
Gas Logs
Wood Burning Stove
Other:

Estimated Cost of Fire Work $850

Signature:

Print Name: GARY PUCO

Township of Brick

Counter Form
(PLEASE PRINT)

Site Location: 33 ROSETTI CT
Block: 1192.19 Lot: 47
Owner's Name: MATTHEWS
Owner's Mailing Address: 33 ROSETTI CT
Phon [redacted]

BUILDING

Contractor:
Address: ATLANTIC HEATING & COOLING, INC. 1267 CORONADO ST LAKEWOOD, NJ 08701
Phone#: 367 8534
Lis #
Federal Emp # or SSN 232746620

Technical Data

Description of Work:
B vent chimney

Type of Work

___New Building
___Addition
___Alteration
___Roofing
___Asbestos Abatement
___Siding
___Fence
___Pool
___Demolition
___Sign _____sq ft

Building Characteristics

Use Group Present:_____ Proposed:_____
No of Stories:
Height of Structure:
Area of the largest floor:
Area of New Building:
Volume of Structure:
Total Land Disturbed:

Estimated Cost of Building Work: 150-

Signature:
Please Print Name GARY PUCO

ELECTRICAL

Contractor: ATLANTIC HEATING & COOLING, INC.
Address: 1267 CORONADO ST LAKEWOOD, NJ 08701
Phone#: 367 8534
Lis #:
Federal Emp # or SSN 232746621

Technical Data

Item	Quantity
Lighting Fixtures	
Receptacles	
Switches	1
Detectors	
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	
Alarm Devices/FAC Panel	
Total	
Pool	
Spa/Hot Tub/Storable Pool	
Electric Range	K
Oven/Surface Unit	KV
Electric Water Heater	K
Electric Dryer	K
Dishwasher	K
Garbage Disposal	K
A/C Unit –Central Air	K
Space Heater/Air Handler	K
Baseboard Heating	K
Motors 1+ HP	
Transformer/Generator	K
Light Stander	AM
Service	AM
Subpanel	AM
Motor Control Center	AM
Sign/Outline Light	K
Furnace	1
Steam Boiler	
Other:	

Estimated Cost of Electrical Work: 50

Signature:
Please Print Name GARY PUCO

CONTRACTOR'S SEAL