BUILDING SUBCODE TECHNICAL SECTION

INSPECTION COPY

Control #

Date Issued

Permit # 221-752

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

Block 20 Lot 7 Qualification Code

Work Site Location 642 Bismarck Avenue
Mantua Township NJ 08051

Owner in Fee: Robert Dimon

T e-mail robert.dimond@nielsen.com

Address 642 Bismarck Avenue (street) Township of Mantua (municipality) NJ (zip code) 08051

Contractor: Ad Energy LLC Te...

Address 423 Commerce Ln, Suite 4 e-mail permits@ad-energy.com
West Berlin, NJ 08091

Contractor License No. or Builder Registration No. 13VH07809600 Exp. Date 3/31/2022

Home Improvement Contractor Registration No. or Exemption Reason 13VH07809600

Federal Emp. ID No. 264430933 FAX:

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[ ] No Plans Required		
[X] All	11/22	22
[ ] Footings/Foundations		
[ ] Structural/Framework		
[ ] Exterior		
[ ] Interior		

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

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

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

INSPECTIONS

Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			12/21/22	
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present Resi Proposed Resi

No. of Stories

Height of Structure ft.

Area — Largest Floor 1500 sq. ft.

New Bldg. Area/All Floors sq. ft.

Volume of New Structure cu. ft.

Max. Live Load

Max. Occupancy Load

Constr. Class Present X Proposed

If Industrialized Building:
State Approved HUD

Est. Cost of Bldg. Work:

1. New Bldg. $
2. Rehabilitation $ 1512
3. Total (1+ 2) $ 1512

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

C. CERTIFICATION IN LIEU OF OATH

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

Sign here:

Print name here: Eric M Crane

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Installation of solar panels.

E-MAILED To Pam 1-13-22

TYPE OF WORK:

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

FEE (Office Use Only)

$ 200

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

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

INSPECTION COPY

Date Received 12/17/21
Control #
Date Issued
Permit # 221-752

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

Block 20 Lot 7 Qualification Code

Work Site Location 642 Bismarck Avenue
Mantua Township NJ 08051

Owner in Fee: Robert Dimon

Tel. e-mail robert.dimond@nielsen.com

Address 642 Bismarck Avenue (street) Mantua (municipality) NJ 08051 (zip code)

Contractor: Michael J LaRosa Electrical Contractor Tel.

Address e-mail larosamike679@gmail.com
422 Sheffield Rd Cherry Hill NJ 08034

Contractor License No. 11275 Exp. Date 3/31/2024

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Single Family Dwelling Utility Co.

Est. Cost of Elec. Work $ 8064

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial Underslab Utilities Approved
Date: Approved by:
[X] Electric Plans Approved
Date: 12/17/21 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:
Approved by:

INSPECTIONS Types	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Const. Serv.				
TCO				
Other				
Service				
Final	12/21		12-22-21	
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: Mike LaRosa

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Installation of solar panels

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	
14		Inverters	
14		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	
14	0.36	KW Transformer/Generator / Panels	
		AMP Service	
1, 1	60, 100	AMP Subpanels (Disconnect)	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1	5.04	KW PV System Size	

Administrative Surcharge	$
Minimum Fee	$ 100.00
State Permit Surcharge Fee	$
TOTAL FEE	$

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.

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

INSPECTION COPY

Date Received / Control # 12/7/21

Date Issued / Permit # 221-752

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

Block 20 Lot 7 Qualification Code

Work Site Location 642 Bismarck Ave
Mantua, NJ 08051

Owner in Fee: Robert Dimond

Tel. e-mail robert.dimond@nielsen.com

Address (street) Mantua (municipality) 08051

Contractor: Ad Energy LLC Tel.

Address 423 Commerce Ln, Suite 4 e-mail permits@ad-energy.com
West Berlin, NJ 08091

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

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

Fire Alarm Contractor No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason 13VH07809600

Federal Emp. ID N FAX:

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present R-5 Proposed R-5

Constr. Class: Present VB Proposed VB

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

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

Location:

Total Cost of Fire Protection Work $ 50

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

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

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

C. CERTIFICATION IN LIEU OF OATH

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

Applicant/Contractor sign here:

Print name here: Eric Crane

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

DESCRIPTION OF WORK:
Water Supply Source Install solar panels
Method of Alarm/Suppression System Supervision

	NUMBER
Flammable/Combustible Tanks	
Alarm Systems	
[ ] System	
[ ] 110v Interconnected	
[ ] CO Detectors/110v	
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	
Supervisory Devices (i.e., tampers, low/high air)	
Signaling Devices (i.e., horn/strobes, bells)	
Other Devices	
TOTAL	0
Suppression Systems	
Fire Pump GPM Type	
Dry Pipe/Alarm Valves	
Pre-action Valves	
Sprinkler Heads (Dry and Wet)	
Standpipes	
Pre-engineered Systems	
Wet Chemical	
Dry Chemical	
CO_2 Suppression	
Foam Suppression	
FM200 Suppression	
Other	
Other Systems	
Kitchen Hood Exhaust System	
Smoke Control System	
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid	
Fireplace Venting/Metal Chimney	
Other SOLAR	

FEE (Office Use Only)
$ 75

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Fire Protection Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg [ ] Elec [ ] Plumb [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 11/16/21
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 12/20/21
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other			12/20/21	

U.C.C. F140 (rev. 02/10) Internet version

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