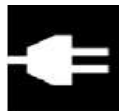




ELECTRICAL SUBCODE TECHNICAL SECTION



Date Received 4/25/2007
Date Issued 4/25/2007
Control # _____
Permit # 06-0437+M

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

Block 212 Lot 25.01 Qualification Code _____

Work Site Location: 50 STIRLING ROAD WARREN, NJ

Owner in Fee: WARREN CATERING

Address 50 STIRLING ROAD JERSEY CITY NJ 07305-

Email _____

Tel. 201/7610025

Contractor: PETROFF POWER ELEC.

Address 30 KEARNY AVE. WHIPPANY NJ -

Email _____

Tel. 732/7541416 Fax. / -

Lic No. _____ Exp. Date _____

Home improvement Contractor Registration No. or Exemption Reason(is applicable): _____

Federal Employee No. 22-2701883

B. ELECTRICAL CHARACTERISTICS

Use Group Present A-3 Proposed A-3

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as _____ Utility Co. _____

Estimated Cost of Electrical Work \$100

JOB SUMMARY (Office Use Only)							
PLAN REVIEW		INSPECTIONS		Dates (Month/Day)			
	Date	Initial	Type:	Failure	Failure	Approval	Initial
☐ No Plan Required			Rough				
Partial Underslab Utilities Approved			Barrier-Free				
Date: _____ by: _____			Trench				
Electric Plans Approved			Temp. Serv.				
Date: _____ by: _____			Constr. Serv.				
Joint Plan Review Required			TCO				
☐ Building ☐ Plumbing			Other				
☐ Fire ☐ Elevator			Service				
☐ Electrical Plans Approved			Final				
SUBCODE APPROVAL FOR PERMIT			Barrier-Free				
Date: _____ by: _____			Temp. Cut-in-Card Date Issued				
SUBCODE APPROVAL for CERTIFICATE			Final Cut-in-Card Date Issued				
☐ CO ☐ CCO ☐ CA			Annual Pool Inspection				
Date: _____			Date of Grounding and Bonding Certification				
Approved by: _____							

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature and Printed Name

☐ Licensed Elec Contr ☐ Certif'd Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
CEILING, SIGN & ROOFING

QTY.	SIZE	ITEMS	FEE (Office Use Only)
_____	_____	Lighting Fixtures	_____
_____	_____	Receptacles	_____
_____	_____	Switches	_____
_____	_____	Detectors	_____
_____	_____	Light Poles	_____
_____	_____	Motors - Fract. HP	_____
_____	_____	Emergency & Exit Lights	_____
_____	_____	Communication Points	_____
_____	_____	Alarm Devices/F.A.C. Panel	_____
_____	_____	TOTAL NUMBERS	_____
_____	_____	Pool Permit/with UW Lights	_____
_____	_____	Storable Pool/Spa/Hot Tub	_____
_____	_____	KW Elec. Range/Receptical	_____
_____	_____	KW Oven/Surface Unit	_____
_____	_____	KW Elec. Water Heater	_____
_____	_____	KW Elec. Dryer/Recepticle	_____
_____	_____	KW Dishwasher	_____
_____	_____	HP Garbage Disposal	_____
_____	_____	KW Central A/C Unit	_____
_____	_____	HP/KW Space Heater/Air	_____
_____	_____	KW Baseboard Heat	_____
_____	_____	HP Motors 1/+ HP	_____
_____	_____	KW Transformer/Generator	_____
_____	_____	AMP Service	_____
_____	_____	AMP Subpanels	_____
_____	_____	AMP Motor Control Center	_____
<u>1</u>	<u>2</u>	KW Elec. Sign/Outline Light	<u>\$10</u>

Administrative Surcharge _____
Minimum Fee \$50
State Permit Surcharge Fee _____
TOTAL FEE \$50