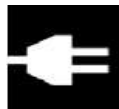




ELECTRICAL SUBCODE TECHNICAL SECTION



Date Received 10/26/2007
Date Issued 10/26/2007
Control # _____
Permit # 06-0437+V

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: JWA ELECTRIC

Address 413 PARKER AVE. SOUTH AMBOY NJ 08879-

Email _____

Tel. 732/7214148 Fax. 732/7214148

Lic No. _____ Exp. Date _____

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

Federal Employee No. 13-5805709

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 \$150

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
PLAN REVISION

QTY.	SIZE	ITEMS	FEE (Office Use Only)
_____	_____	Lighting Fixtures	_____
_____	_____	Receptacles	_____
_____	_____	Switches	_____
_____	_____	Detectors	_____
_____	_____	Light Poles	_____
<u>61</u>	_____	Motors - Fract. HP	_____
_____	_____	Emergency & Exit Lights	_____
_____	_____	Communication Points	_____
<u>33</u>	_____	Alarm Devices/F.A.C. Panel	_____
_____	_____	_____	_____
<u>94</u>	_____	TOTAL NUMBERS	<u>\$80</u>
_____	_____	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	_____
<u>1</u>	<u>20</u>	KW Dishwasher	<u>\$60</u>
_____	_____	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	_____
_____	_____	KW Elec. Sign/Outline Light	_____
_____	_____	FAN/SWITCH	<u>\$60</u>

Administrative Surcharge _____
Minimum Fee _____
State Permit Surcharge Fee \$1
TOTAL FEE \$201