



FIRE PROTECTION SUBCODE TECHNICAL SECTION



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

Block 223 Lot 1.01 Qualification Code 08370

Work Site Location Phase II "C" - 501 Woodbine-Oceanview Rd

Owner in Fee: RDS Investments LLC

Tel: (609) 226-8715 e-mail

Address Po Box 279 Cape May Court House, NJ 08210

Contractor: Aliano Brothers, Inc. Tel: (856) 794-9490

Address 2560 Industrial Way, Vineland, NJ

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

Federal Emp. No. FAX: ()

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present B/F 1 Proposed Fire Alarm System: [] New or [] Existing

Constr. Class: Present Proposed Location of Panel:

Heating System: [] New or [] Existing [] HVAC Fire Suppression/Standpipe System:

Type: [] Gas [] Oil [] Electric [] Solar [] New or [] Existing

[] Other C.P. Gas Location of Main Control Valve:

Location: Office, Above Ceiling, Warehouse, 2nd floor, Type Tub at Ceiling

Fuel Storage Tank: Fuel Type: [] Flammable or [] Combustible Capacity Bureau 1000 for "B" and "C", Shared.

Total Cost of Fire Protection Work \$

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

Joint Plan Review Required:

☐ Building ☐ Plumbing

☐ Electric ☐ Elevator

☐ Fire Plans Approved

Date: 10/1/05

Approved by:

SUBCODE APPROVAL

☐ CO ☐ CCO ☐ CA

Date: 4-30-07

Approved by:

INSPECTIONS

Type: Failure Failure Approval Initial

Alarm System

Suppression Sys.

Standpipe

Fire Pump

Pre-Eng. System

Mechanical

Smoke Control

TCO

Flam/Combust Tanks

Fireplace Venting

Final

Other

C. CERTIFICATION IN LIEU OF OATH

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

☐ Certified Contractor Applicant's Signature/Contractor's Signature

D. TECHNICAL SITE DATA DESCRIPTION OF WORK:

Water Supply Source N/A

Method of Alarm/Suppression System Supervision

Flammable/Combustible Tanks NUMBER FEE (Office Use Only)

Alarm Systems

☐ System

☐ 110V Interconnected

☐ CO Detectors/110V

Alarm Devices (i.e., smoke, heat, pulls, water/flow)

Supervisory Devices (i.e., tamper, low/high air)

Signaling Devices (i.e., horn/strobes, bells)

Other Devices

TOTAL

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

CO₂ Suppression

Foam Suppression

FM200 Suppression

Other

Other Systems

Kitchen Hood Exhaust System

Smoke Control System

Fired Appliances ☐ Gas or ☐ Oil

Fireplace Venting/Metal Chimney

Other

Date Received
Control #

Date Issued
Permit #

11/13/02
06-32944

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$ 38-