

Christine Ciallella

661-2021

From: Valerie Daberkoe <opra+request-26187-c1ae9d81@requests.opramachine.com> on behalf of Valerie Daberkoe
Sent: Wednesday, September 29, 2021 7:52 AM
To: OPRA requests at Washington Township (Gloucester)
Subject: OPRA request - Environmental Records

Dear Washington Township (Gloucester),

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.

Records requested:

EnviroSure is conducting a Phase I ESA at 4651 Route 42 (Block 115.04; Lots 11.01, 11.02, 12, 12.01 and 13). In that regard, we are requesting a search of all files pertaining to the property. Especially, underground storage tanks, environmental concerns, building permits and ownership records.

Thank you.

↓ DEP

Valerie Daberkoe
EnviroSure, Inc.

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-26187-c1ae9d81@requests.opramachine.com

Is cciallella@twp.washington.nj.us the wrong address for OPRA requests to Washington Township (Gloucester)? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=washington_township_gloucester

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
<https://opramachine.com/help/officers>

View this OPRA request & responses online:
https://opramachine.com/request/environmental_records_73

Please note that in some cases publication of requests and responses will be delayed.

If you find this service useful as an OPRA custodian, please ask your web manager to link to us from your organisation's website.

10/6/21. -pulled all permits from vault. (-VOD)



BUILDING SUBCODE TECHNICAL SECTION



AUG 10 2011

CONSTRUCTION OFFICE

Date Received
Control #

9-12-11

Date Issued
Permit #

11-1224

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

Remove existing flat roof, replace with new EPDM.

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Rehabilitation
- ☒ Roofing
- ☐ Siding
- ☐ Fence
- ☐ Sign
- ☐ Pool
- ☐ Retaining Wall
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Radon Remediation
- ☐ Other
- ☐ Demolition

FEE (Office Use Only)
\$

713

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

36

749

1 White = Inspector Copy
3 Pink = Office Copy
2 Canary = Office Copy
4 Gold = Applicant Copy

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

Block 11504 Lot 12 Qualification Code

Work Site Location 4651 Bre 42

Owner in Fee: Sun National Bank

Tel. () e-mail

Address 226 Landis Ave Vineland, NJ 08360

Contractor: Manor Hill Contracting SCS, LLC Tel. (609) 744-5451

Address 2417 Welsh Rd Ste 21 #235 e-mail bric@manorhillcontracting.com

Contractor License No. or Builder Registration No. #042651 Exp. Date 4/30/12

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. (886) 504-0072

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Failure	Approval	Initial
☒ No Plans Required	8/15/11	MB	Type: Footing				
☐ All			Footing Bonding				
☐ Footings/Foundations			Foundation				
☐ Structural/Framework			Slab				
☐ Exterior			Frame				
☐ Interior			Truss Sys./Bracing				
Joint Plan Review Required:			Barrier-Free				
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Insulation				
SUBCODE APPROVAL for PERMIT			Finishes -Base Layer				
Date:			Finishes -Final				
Approved by:			Energy				
SUBCODE APPROVAL for CERTIFICATE			Mechanical				
☐ CO ☐ CCO ☒ CA			TCO				
Date:	9/13/11		Other				
Approved by:			Final				
			Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Constr. Class	Present	Proposed
No. of Stories	2		If Industrialized Building:		
Height of Structure			Slab Approved		HUD
Area — Largest Floor			Est. Cost of Bldg. Work:		
New Bldg. Area/All Floors			1. New Bldg.	\$	
Volume of New Structure			2. Rehabilitation	\$	
Max. Live Load			3. Total (1+2)	\$	25,000.00
Max. Occupancy Load					

U.C.C. F110
(rev. 12/07)

Township of Washington

523 Egg Harbor Road

Sewell, NJ 08080

(856)256-0234 FAX (856)218-1473

Permit No. 20111224

Control No. 36740

Parcel(Block/Lot) 115.04/12.

Date 9/12/11

Construction Permit

Work Site Location 4651 ROUTE 42

Contractor... MANOR HILL CONTRACTING

Owner in Fee..... SUN NATIONAL BANK ACCTS PAYABLE

Address..... 2417 WELSH ROAD STE 21

Address..... 226 W LANDIS AVE

PHILADELPHIA, PA 19114

VINELAND, NJ 08360

Phone (609)744-5451

Phone

Lic No..... 042691- / /

Fed Emp No.

Permission is hereby granted to do the following work:

- | | | | |
|--|-------------------------------------|--|------------------------------------|
| ☒ BUILDING | ☐ PLUMBING | ☐ DEMOLITION | ☐ ONGOING - |
| ☐ ELECTRIC | ☐ FIRE | ☐ ASBESTOS ABATEMENT | ☐ OTHER |
| ☐ ELEVATOR | ☐ MECHANICAL | ☐ LEAD HAZARD ABATEMENT | |

Description of Work:

REMOVE AND REPLACE WITH NEW ROOF

PAYMENTS * (Office Use Only)

Building	\$749
Electrical	0
Plumbing	0
Fire Protection	0
Elevator Devices.....	0
Mechanical.....	0
State Training Fee	43
Certificate of Occupancy	0
Other	0
Total	\$792

Note: If construction does not commence within one (1) year of the date of issuance or if construction ceases for a period of six(6) months, this permit is Void.

Estimated Cost of Work: \$25,000

Construction Official

Date 9/17/11

Check# Cash.....

Paid

Collected By

Total Administrative Fee: \$36

Failure to obtain all required inspections may result in administrative action
Final inspections are required before final payment is to be made to contractor
An approved set of plans must be kept at the worksite at all times

EPDM

Specification Manual





BUILDING 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 1304 Lot 12 Qualification Code _____
Work Site Location San Bank
Hwy 42 Turnersville
Owner in Fee: San Bank

Tel. _____ e-mail _____
Address 226 Lendie Av Vineland NJ
Contractor: Encon Service Co Tel. 732, 922 1305
Address 3433 Sunset Ave e-mail _____
Contractor License No. or Builder Registration No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. _____ FAX: 732, 922 0743

JOB SUMMARY (Office Use Only)					
PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
	Date	Initial	Type	Failure	Approval
☐ No Plans Required					
☐ All			Footings		
☐ Footings/Foundations			Footings Bonding		
☐ Structural/Framework			Foundation		
☐ Exterior			Slab		
☐ Interior			Frame		
Joint Plan Review Required:			Truss Sys./Bracing		
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Barrier-Free		
SUBCODE APPROVAL for PERMIT			Insulation		
Date: _____			Finishes -Base Layer		
Approved by: _____			Finishes -Final		
SUBCODE APPROVAL for CERTIFICATE			Energy		
☐ CO ☐ CCO ☐ CA			Mechanical		
Date: _____			TCO		
Approved by: _____			Other		
			Final		
			Barrier-Free		

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____

No. of Stories _____

Height of Structure _____ ft.

Area — Largest Floor _____ sq. ft.

New Bldg. Area/All Floors _____ sq. ft.

Volume of New Structure _____ cu. ft.

Max. Live Load _____

Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____

If Industrialized Building: State Approved _____ HUD _____

Est. Cost of Bldg. Work:

1. New Bldg. \$ 2,300

2. Rehabilitation \$ 2,300

3. Total (1+2) \$ 2,300

U.C.C. F110 (rev. 12/07)

Date Received _____
Control # _____
Date Issued _____
Permit # _____

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.
Bryce Murphy
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Install 2.5 ton ductless air conditioning split system for basement computer room.

TYPE OF WORK:

☐ New Building
☐ Addition
☐ Rehabilitation
☐ Roofing
☐ Siding
☐ Fence
☐ Sign
☐ Pool
☐ Retaining Wall
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☐ Radon Remediation
☒ Other Air Conditioning
☐ Demolition

Height (exceeds 6') _____ Sq. Ft. _____

FEE (Office Use Only)
\$ _____

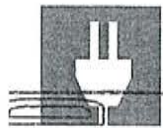
Administrative Surcharge \$ _____
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ _____

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

Date Received
Control # 12.14.09
09-1991

Date Issued
Permit #



ELECTRICAL SUBCODE DEC 3 - 2009
TECHNICAL SECTION

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

Block 115.01 Lot 12 Qualification Code _____
Work Site Location 4657 Rt. 42, Tennessee, TN
Owner in Fee 500 Bank
Address 226 Bank Ave
Vineyard, TN

Tel _____
Contractor Optimum Electrical Service
Address 418 4th Ave, Bellmore, NY
Tel (856) 444-1819 FAX () _____
Contractor License No. 7699
Federal Emp. No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ 4500 2150

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
[] No Plans Required	Date Initial	Type:	Failure	Approval	Initial
Joint Plan Review Required:		Rough			
[] Building	[] Plumbing	Barrier-Free			
[] Fire	[] Elevator	Trench			
[] Elec. Plans Approved		Temp. Sep.			
		Conserv. Serv.			
		TCO			
		Other			
		Service			
		Final			
		Barrier-Free			
		Temp. Cut-in-Card Date Issued			
		Final Cut-in-Card Date Issued			
		Annual Pool Inspection			
		Date of Grounding and Bonding Certification			

Date: 12-10-09
Approved by: [Signature]

SUBCODE APPROVAL
[] CO [] CCO [] CA
Date: 12-16-09
Approved by: [Signature]

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.

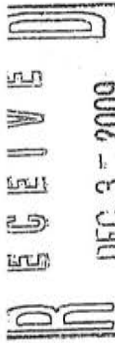
Applicant's Signature/Contractor's Seal and Signature
[] Licensed Elec. Contractor [] Certifd Landscape Irrigation Contr'r [] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
		Lighting Fixtures
		Receptacles
		Switches
		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel

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	
KW Transformer/Generator	
AMP Service	
AMP Subpanels	
AMP Motor Control Center	
KW Elec. Sign/Outline Light	

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



DEC 3 - 2009



PLUMBING 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 115.04 Work Site Location 4651 Rte 13
Tomerquile
Owner in Fee Sin Bank
Address 226 London Av
Vineland NJ

Tel () 732 922 1305 Fax () 732 922 0745
Contractor License No. 4651 Rte 13
Federal Emp. No. 0712

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed Public Sewer Private Septic Public Water
Building Sewer Size 10" - 2150
Water Service Size 10" - 2150
Est. Cost of Plumbing Work 1000 - 2150

JOB SUMMARY (Office Use Only)

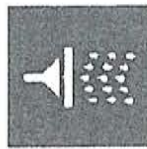
PLAN REVIEW	INSPECTIONS	Dates (Month/Day)
☒ No Plans Required	Type: Slab	Failure Approval Initial
Joint Plan Review Required:	Rough	
☐ Building ☐ Electric	Water	
☐ Fire ☐ Elevator	Sewer	
☐ Plumbing Plans Approved	Fixtures	
Date: <u>12-5-09</u>	Gas Equipment	
Approved by: <u>[Signature]</u>	Gas Piping	
SUBCODE APPROVAL	LPG Gas Tank	
☐ CO ☐ CCO ☐ CA	Fuel Oil Piping	
Date: <u>12-17-09</u>	Solar	
Approved by: <u>[Signature]</u>	TCO	
	<u>Fire</u>	<u>12-17-09</u>

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
[Signature]

☐ Licensed Plumbing Contractor ☐ Exempt Applicant



Date Received 12-14-09
Date Issued 09-1991
Control # 09-1991
Permit # 09-1991

D. TECHNICAL SITE DATA (List of all fixtures.)

FIXTURE/EQUIPMENT

NO. 1 Water Closet 13
Urinal/Bidet 13
Bath Tub 13
Lavatory 13
Shower 13
Floor Drain 13
Sink 13
Dishwasher 13
Drinking Fountain 13
Washing Machine 13
Hose Bibb 13
Water Heater 13
Fuel Oil Piping 13
Gas Piping 13
LPG Gas Tank 13
Steam Boiler 13
Hot Water Boiler 13
Sewer Pump 13
Interceptor/Separator 13
Backflow Preventer 13
Greasetrap 13
Sewer Connection 13
Water Service Connection 13
Stacks 13
Other Air Conditioners
Other 13

FEE (Office Use Only)
\$ 13

Administrative Surcharge \$ 13
Minimum Fee \$ 13
State Permit Surcharge Fee \$ 13
TOTAL FEE \$ 13

UCC/F-130 (REV. 1/04)
Professional Printing
(856) 468-7933

1. White-Inspector copy
2. Canary- Applicant copy
3. Pink- Office Copy
4. White Tag- Office copy

Township of Washington

523 Egg Harbor Road
Sewell, NJ 08080
(856)256-0234 FAX (856)218-1473

Permit No. **20091991**
Control No. **32750**
Parcel(Block/Lot) **115.04/12.**
Date **12.14.09**

Construction Permit

Work Site Location 4651 ROUTE 42 Contractor... ENCON SERVICE
Owner in Fee..... SUN NATIONAL BANK ACCTS PAYABLE Address..... 3433 SUNSET AVE
Address..... 226 W LANDIS AVE OCEAN TWP, N. J. 07712
VINELAND, NJ 08360
Phone (732)922-1305
Lic No..... None
Fed Emp No. _____

Permission is hereby granted to do the following work:

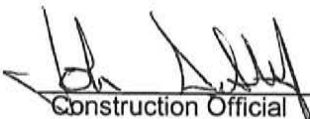
- | | | |
|--|--|--|
| ☐ BUILDING | ☒ PLUMBING | ☐ LEAD HAZARD ABATEMENT |
| ☒ ELECTRIC | ☐ FIRE | ☐ DEMOLITION |
| ☐ ELEVATOR | ☐ ASBESTOS ABATEMENT | ☐ OTHER |
| | | ☐ Mechanical |

Description of Work:

AIR CONDITIONING SPLIT SYSTEM

Note: If construction does not commence within one (1) year of the date of issuance or if construction ceases for a period of six(6) months, this permit is Void.

Estimated Cost of Work: \$4,300

 12/11/09
Construction Official Date

*Failure to obtain all required inspections may result in administrative action
Final inspections are required before final payment is to be made to contractor
An approved set of plans must be kept at the worksite at all times*

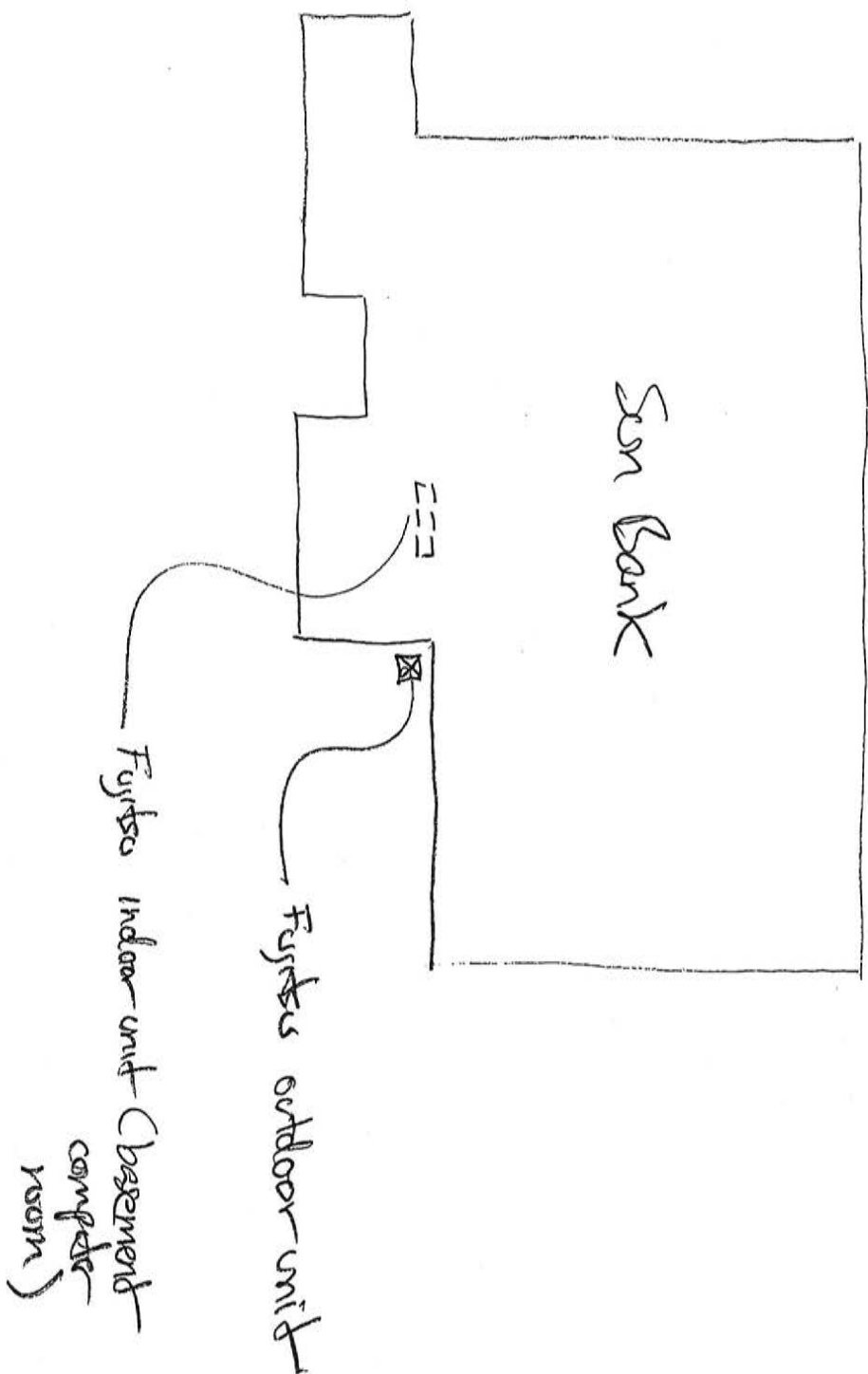
Municipality Copy/Applicant Copy

U.C.C. F190 (Rev. 3/96)

PAYMENTS (Office Use Only)

Building	\$0
Electrical	45
Plumbing	45
Fire Protection	0
Elevator Devices.....	0
Mechanical.....	0
State Training Fee	7
Certificate of Occupancy	0
Other	0
Total	\$97
Check#/Cash.....	2126
Paid	97
Collected By	JN

4451 Rt. 42 Turnersville 15.04/12



No Scale

← Route 42 (North) →

FUJITSU



INVERTER



**HEAT&COOLING MODEL
(REVERSE CYCLE)**

**ROOM AIR CONDITIONER
WALL MOUNTED TYPE**

Indoor Unit

ASU24RLXQ

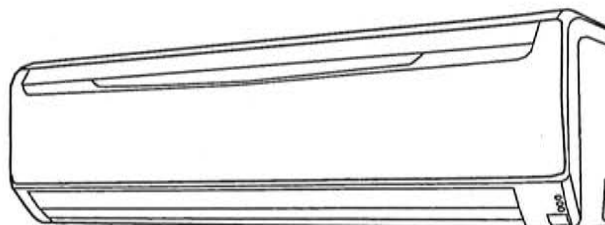
ASU30RLXQ

Outdoor Unit

AOU24RLXQ

AOU30RLXQ

OPERATING MANUAL MODE D'EMPLOI MANUAL DE FUNCIONAMIENTO



English

Français

Español

KEEP THIS OPERATION MANUAL
FOR FUTURE REFERENCE

FUJITSU GENERAL LIMITED

P/N9315345165-01

TYPE TYPE TIPO	HEAT & COOL MODEL MODELE RÉVERSIBLE MODELO DE REFRIGERACIÓN Y CAIEFACCÓN
----------------------	--

MODEL MODELE MODELO	INDOOR UNIT UNIDAD INTERIOR UNITÉ INTÉRIEURE	ASU24RLXQ
	OUTDOOR UNIT UNIDAD EXTERIOR UNITÉ EXTÉRIEURE	AOU24RLXQ

SPECIFICATIONS

POWER SUPPLY	208/230 V-60 Hz
COOLING	
CAPACITY	24200 BTU/h
INPUT POWER	2.18 kW
CURRENT	9.6 A
HEATING	
CAPACITY	27600 BTU/h
INPUT POWER	2.38 kW
CURRENT	10.5 A

FICHE TECHNIQUE

ALIMENTATION	208/230 V-60 Hz
REFROIDISSEMENT	
PUISSANCE FRIGORIFIQUE	24200 BTU/h
PUISSANCE ABSORBÉE	2.18 kW
INTENSITÉ	9.6 A
CHAUFFAGE	
PUISSANCE FRIGORIFIQUE	27600 BTU/h
PUISSANCE ABSORBÉE	2.38 kW
INTENSITÉ	10.5 A

ESPECIFICACIONES

ALIMENTACIÓN	208/230 V-60 Hz
REFRIGERACIÓN	
CAPACIDAD	24200 BTU/h
ENTRADA DE ALIMENTACIÓN	2.18 kW
CORRIENTE	9.6 A
CALEFACCIÓN	
CAPACIDAD	27600 BTU/h
ENTRADA DE ALIMENTACIÓN	2.38 kW
CORRIENTE	10.5 A

TYPE TYPE TIPO	HEAT & COOL MODEL MODELE RÉVERSIBLE MODELO DE REFRIGERACIÓN Y CAIEFACCÓN
----------------------	--

MODEL MODELE MODELO	INDOOR UNIT UNIDAD INTERIOR UNITÉ INTÉRIEURE	ASU30RLXQ
	OUTDOOR UNIT UNIDAD EXTERIOR UNITÉ EXTÉRIEURE	AOU30RLXQ

SPECIFICATIONS

POWER SUPPLY	208/230 V-60 Hz
COOLING	
CAPACITY	30600 BTU/h
INPUT POWER	3.86 kW
CURRENT	17.0 A
HEATING	
CAPACITY	32000 BTU/h
INPUT POWER	3.00 kW
CURRENT	13.2 A

FICHE TECHNIQUE

ALIMENTATION	208/230 V-60 Hz
REFROIDISSEMENT	
PUISSANCE FRIGORIFIQUE	30600 BTU/h
PUISSANCE ABSORBÉE	3.86 kW
INTENSITÉ	17.0 A
CHAUFFAGE	
PUISSANCE FRIGORIFIQUE	32000 BTU/h
PUISSANCE ABSORBÉE	3.00 kW
INTENSITÉ	13.2 A

ESPECIFICACIONES

ALIMENTACIÓN	208/230 V-60 Hz
REFRIGERACIÓN	
CAPACIDAD	30600 BTU/h
ENTRADA DE ALIMENTACIÓN	3.86 kW
CORRIENTE	17.0 A
CALEFACCIÓN	
CAPACIDAD	32000 BTU/h
ENTRADA DE ALIMENTACIÓN	3.00 kW
CORRIENTE	13.2 A

FEATURES AND FUNCTIONS

INVERTER

At the start of operation, a large power is used to bring the room quickly to the desired temperature. Afterwards, the unit automatically switches to a low power setting for economic and comfortable operation.

COIL DRY OPERATION

The Indoor unit can be dried by pressing the COIL DRY button on the Remote Control Unit so as to avoid going moldy and restrain the breed of bacterium.

AUTO CHANGEOVER

The operation mode (cooling, dry, heating) is switched automatically to maintain the set temperature, and the temperature is kept constant at all times.

PROGRAM TIMER

The program timer allows you to integrate OFF timer and ON timer operations in a single sequence. The sequence can involve one transition from OFF timer to ON timer, or from ON timer to OFF timer, within a twenty-four hour period.

SLEEP TIMER

When the SLEEP button is pressed during Heating mode, the air conditioner's thermostat setting is gradually lowered during the period of operation; during cooling mode, the thermostat setting is gradually raised during the period of operation. When the set time is reached, the unit automatically turns off.

WIRELESS REMOTE CONTROL UNIT

The Wireless Remote Control Unit allows convenient control of air conditioner operation.

HORIZONTAL AIRFLOW: COOLING/ DOWNWARD AIRFLOW: HEATING

For cooling, use horizontal airflow so the cool air does not blow directly on the occupants in the room. For heating, use downward airflow to send powerful, warm air to the floor and create a comfortable environment.

OMNI-DIRECTIONAL AIR FLOW (SWING OPERATION)

Three-dimensional control over air direction swing is possible through dual use of both an UP/DOWN air direction swing and RIGHT/LEFT air direction swing. Since UP/DOWN air direction flaps operate automatically according to the operating mode of the unit, it is possible to set air direction based on the operating mode.

REMOVABLE OPEN PANEL

The indoor unit's Open Panel can be removed for easy cleaning and maintenance.

MILDEW-RESISTANT FILTER

The AIR FILTER has been treated to resist mildew growth, thus allowing cleaner use and easier care.

SUPER QUIET OPERATION

When the FAN CONTROL button is used to select QUIET, the unit begins super-quiet operation; the indoor unit's airflow is reduced to produce quieter operation.

AIR CLEANING MODE

Relies on the air conditioner's power to quickly purify the air in the room.

ELECTRONIC AIR CLEAN FILTER

Install for use inside of the dust collection unit. For details on how to install the filter, please refer to page 15. Electrical power is used to charge the filter to remove contaminants from the air and to effectively collect dust and remove odors. It also helps to reduce the bacterial activity.

PREPARATION

Load Batteries (AAA/R03/LR03 × 2)

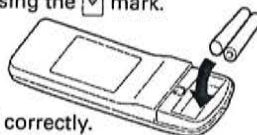
- 1 Press and slide the battery compartment lid on the reverse side to open it.

Slide in the direction of the arrow while pressing the  mark.

- 2 Insert batteries.

Be sure to align the battery polarities ($\oplus/\ominus$) correctly.

- 3 Close the battery compartment lid.



⚠ CAUTION!

- Take care to prevent infants from accidentally swallowing batteries.
- When not using the Remote Control Unit for an extended period, remove the batteries to avoid possible leakage and damage to the unit.
- If leaking battery fluid comes in contact with your skin, eyes, or mouth, immediately wash with copious amounts of water, and consult your physician.
- Dead batteries should be removed immediately and disposed of properly, either in a battery collection receptacle or to the appropriate authority.
- Do not attempt to recharge dry batteries.

Set the Current time

- 1 Press the CLOCK ADJUST button (Fig. 6 ㉓).

Use the tip of a ball-point pen or other small object to press the button.

- 2 Use the TIMER SET ($\oplus$ / $\ominus$) buttons (Fig. 6 ㉔) to adjust the clock to the current time.

$\oplus$ button: Press to advance the time.

$\ominus$ button: Press to reverse the time.

(Each time the buttons are pressed, the time will be advanced/reversed in one-minute increments; hold the buttons depressed to change the time quickly in ten-minute increments.)

- 3 Press the CLOCK ADJUST button (Fig. 6 ㉓) again.

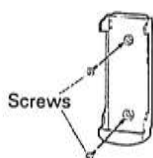
This completes the time setting and starts the clock.

Never mix new and used batteries, or batteries of different types. Batteries should last about one year under normal use. If the Remote Control Unit's operating range becomes appreciably reduced, replace the batteries and press the RESET button with the tip of a ballpoint pen or other small object.

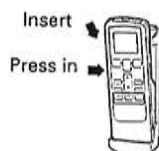
To Use the Remote Control Unit

- The Remote Control Unit must be pointed at signal receiver (Fig. 1 ㉔) to operate correctly.
- Operating Range: About 7 meters.
- When a signal is properly received by the air conditioner, a beeping sound will be heard.
- If no beep is heard, press the Remote Control Unit button again.

Remote Control Unit Holder



① Mount the Holder.



② Set the Remote Control Unit.



③ To remove the Remote Control Unit (when use at hand).

To Stop Operation

Press the **START/STOP** button (Fig. 6 ㉔).

The OPERATION Indicator Lamp (red) (Fig. 3 ㉑) will go out.

About AUTO CHANGEOVER Operation

AUTO: ● When AUTO CHANGEOVER operation first selected, the fan will operate at very low speed for about one minute, during which time the unit detects the room conditions and selects the proper operating mode.

If the difference between thermostat setting and actual room temperature is more than $+4^{\circ}\text{F}$ → Cooling or dry operation

If the difference between thermostat setting and actual room temperature is within $\pm 4^{\circ}\text{F}$ → Monitor operation

If the difference between thermostat setting and actual room temperature is more than -4°F → Heating operation

- When the air conditioner has adjusted your room's temperature to near the thermostat setting, it will begin monitor operation. In the monitor operation mode, the fan will operate at low speed. If the room temperature subsequently changes, the air conditioner will once again select the appropriate operation (Heating, Cooling) to adjust the temperature to the value set in the thermostat.

(The monitor operation range is $\pm 4^{\circ}\text{F}$ relative to the thermostat setting.)

- If the mode automatically selected by the unit is not what you wish, select one of the mode operation (HEAT, COOL, DRY, FAN).

About Mode Operation

Heating: ● Use to warm your room.

- When Heating mode is selected, the air conditioner will operate at very low fan speed for about 3 to 5 minutes, after which it will switch to the selected fan setting. This period of time is provided to allow the indoor unit to warm up before begin full operation.

- When the room temperature is very low, frost may form on the outside unit, and its performance may be reduced. In order to remove such frost, the unit will automatically enter the defrost cycle from time to time. During Automatic Defrosting operation, the OPERATION Indicator Lamp (Fig. 3 ㉑) will flash, and the heat operation will be interrupted.

- After the start of heating operation, it takes some time before the room gets warmer.

Cooling: ● Use to cool your room.

Dry: ● Use for gently cooling while dehumidifying your room.

- You cannot heat the room during Dry mode.

- During Dry mode, the unit will operate at low speed; in order to adjust room humidity, the indoor unit's fan may stop from time to time. Also, the fan may operate at very low speed when adjusting room humidity.

- The fan speed cannot be changed manually when Dry mode has been selected.

Fan: ● Use to circulate the air throughout your room.

During Heating mode:

Set the thermostat to a temperature setting that is higher than the current room temperature. The Heating mode will not operate if the thermostat is set lower than the actual room temperature.

During Cooling/Dry mode:

Set the thermostat to a temperature setting that is lower than the current room temperature. The Cooling and Dry modes will not operate if the thermostat is set higher than the actual room temperature (in Cooling mode, the fan alone will operate).

During Fan mode:

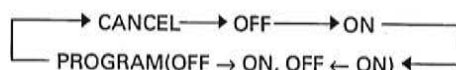
You can not use the unit to heat and cool your room.

TIMER OPERATION

Before using the timer function, be sure that the Remote Control Unit is set to the correct current time (P. 4).

To Use the ON timer or OFF timer

- 1 Press the START/STOP button (Fig. 6 ㉓)**
(if the unit is already operating, proceed to step 2).
The indoor unit's OPERATION Indicator Lamp (red) (Fig. 3 ㉑) will light.
- 2 Press the TIMER MODE button (Fig. 6 ㉔) to select the OFF timer or ON timer operation.**
Each time the button is pressed the timer function changes in the following order:



The indoor unit's green TIMER Indicator Lamp (Fig. 3 ㉒) will light.

- 3 Use the TIMER SET buttons (Fig. 6 ㉕) to adjust the desired OFF time or ON time.**
Set the time while the time display is flashing (the flashing will continue for about five seconds).

+ button: Press to advance the time.

- button: Press to reverse the time.

About five seconds later, the entire display will reappear.

To Cancel the Timer

Use the TIMER button to select "CANCEL".
The air conditioner will return to normal operation.

To Change the Timer Settings

Perform steps 2 and 3.

To Stop Air Conditioner Operation while the Timer is Operating

Press the START/STOP button.

To Change Operating Conditions

If you wish to change operating conditions (Mode, Fan Speed, Thermostat Setting, SUPER QUIET mode), after making the timer setting wait until the entire display reappears, then press the appropriate buttons to change the operating condition desired.

To Use the Program timer

- 1 Press the START/STOP button (Fig. 6 ㉓).**
(if the unit is already operating, proceed to step 2).
The indoor unit's OPERATION Indicator Lamp (red) (Fig. 3 ㉑) will light.
- 2 Set the desired times for OFF timer and ON timer.**
See the section "To Use the ON timer or OFF timer" to set the desired mode and times.
About three seconds later, the entire display will reappear.
The indoor unit's TIMER Indicator Lamp (green) (Fig. 3 ㉒) will light.
- 3 Press the TIMER MODE button (Fig. 6 ㉔) to select the PROGRAM timer operation (OFF → ON or OFF ← ON will display).**

The display will alternately show "OFF timer" and "ON timer", then change to show the time setting for the operation to occur first.

- The program timer will begin operation. (If the ON timer has been selected to operate first, the unit will stop operating at this point.)

About five seconds later, the entire display will reappear.

To Cancel the Timer

Use the TIMER MODE button to select "CANCEL".
The air conditioner will return to normal operation.

To Change the Timer Settings

1. Follow the instructions given in the section "To Use the ON timer or OFF timer" to select the timer setting you wish to change.
2. Press the TIMER MODE button to select either OFF → ON or OFF ← ON.

To Stop Air Conditioner Operation while the Timer is Operating

Press the START/STOP button.

To Change Operating Conditions

If you wish to change operating conditions (Mode, Fan Speed, Thermostat Setting, SUPER QUIET mode), after making the timer setting wait until the entire display reappears, then press the appropriate buttons to change the operating condition desired.

About the Program timer

- The program timer allows you to integrate OFF timer and ON timer operations in a single sequence. The sequence can involve one transition from OFF timer to ON timer, or from ON timer to OFF timer, within a twenty-four hour period.
- The first timer function to operate will be the one set nearest to the current time. The order of operation is indicated by the arrow in the Remote Control Unit's Display (OFF → ON, or OFF ← ON).
- One example of Program timer use might be to have the air conditioner automatically stop (OFF timer) after you go to sleep, then start (ON timer) automatically in the morning before you arise.

ADJUSTING THE DIRECTION OF AIR CIRCULATION

- Adjust the up, down, left, and right AIR directions with the AIR DIRECTION buttons on the Remote Control Unit.
- Use the AIR DIRECTION buttons after the Indoor Unit has started operating and the airflow-direction louvers have stopped moving.

Vertical Air Direction Adjustment

Press the SET button (Vertical) (Fig. 6 ㉓).

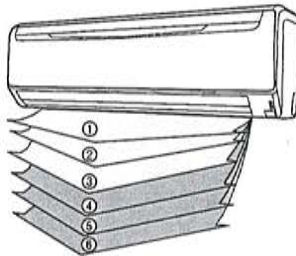
Each time the button is pressed, the air direction range will change as follows:

① ↔ ② ↔ ③ ↔ ④ ↔ ⑤ ↔ ⑥

Types of Air flow Direction Setting:

- ①,②,③ : During Cooling/Dry modes
- ④,⑤,⑥ : During Heating mode

The Remote Control Unit's display does not change.



- Use the air direction adjustments within the ranges shown above.
- The vertical airflow direction is set automatically as shown, in accordance with the type of operation selected.
 - During Cooling/Dry mode : Horizontal flow ①
 - During Heating mode : Downward flow ⑤
- During AUTO mode operation, for the first minute after beginning operation, airflow will be horizontal ①; the air direction cannot be adjusted during this period.
- Direction ① ↔ ②
 - Only the direction of the Air Flow Direction Louver changes; the direction of the Power Diffuser does not change.

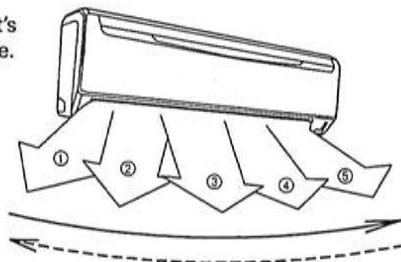
Horizontal Air Direction Adjustment

Press the SET button (Horizontal)(Fig. 6 ㉔).

- Each time the button is pressed, the air direction range will change as follows:

① ↔ ② ↔ ③ ↔ ④ ↔ ⑤

The remote control unit's display does not change.



⚠ DANGER!

- Never place fingers or foreign objects inside the outlet ports, since the internal fan operates at high speed and could cause personal injury.
- Always use the Remote Control Unit's SET button to adjust the vertical airflow louvers. Attempting to move them manually could result in improper operation; in this case, stop operation and restart. The louvers should begin to operate properly again.
- During use of the Cooling and Dry modes, do not set the Air Flow Direction Louvers in the Heating range (④ - ⑥) for long periods of time, since water vapor may condense near the outlet louvers and drops of water may drip from the air conditioner. During the Cooling and Dry modes, if the Air Flow Direction Louvers are left in the heating range for more than 30 minutes, they will automatically return to position ③.
- When used in a room with infants, children, elderly or sick persons, the air direction and room temperature should be considered carefully when making settings.

CLEANING AND CARE

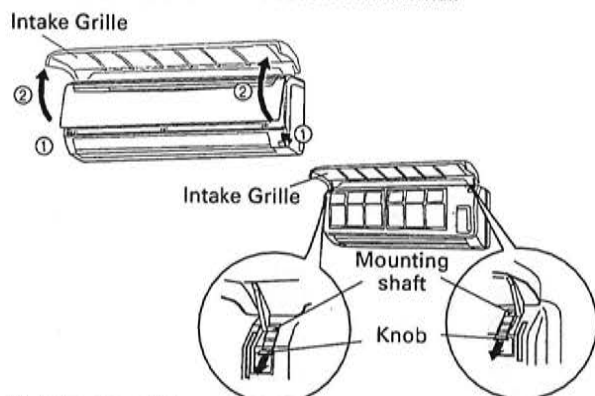
CAUTION!

- Before cleaning the air conditioner, be sure to turn it off and disconnect the Power Supply Cord.
- Be sure the Intake Grille (Fig. 1 ⑧) is installed securely.
- When removing and replacing the air filters, be sure not to touch the heat exchanger, as personal injury may result.

Cleaning the Intake Grille

1. Remove the Intake Grille.

- ① Place your fingers at both lower ends of the grille panel, and lift forward; if the grille seems to catch partway through its movement, continue lifting upward to remove.
- ② Pull past the intermediate catch and open the Intake Grille wide so that it become horizontal.

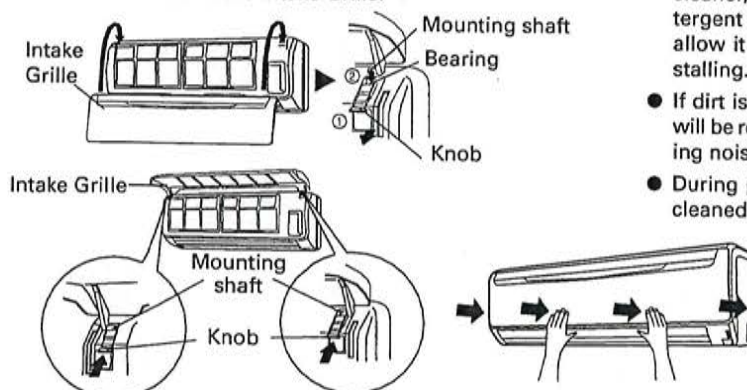


2. Clean with water.

Remove dust with a vacuum cleaner; wipe the unit with warm water, then dry with a clean, soft cloth.

3. Replace the Intake Grille.

- ① Pull the knobs all the way.
- ② Hold the grille horizontal and set the left and right mounting shafts into the bearings at the top of the panel.
- ③ Press the place where the arrow on the diagram indicates and close the Intake Grille.



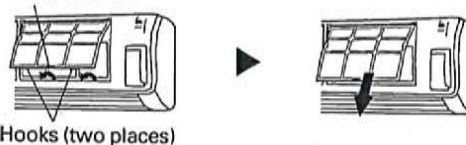
- When used for extended periods, the unit may accumulate dirt inside, reducing its performance. We recommend that the unit be inspected regularly, in addition to your own cleaning and care. For more information, consult authorized service personnel.
- When cleaning the unit's body, do not use water hotter than 104 °F, harsh abrasive cleansers, or volatile agents like benzene or thinner.
- Do not expose the unit body to liquid insecticides or hairsprays.
- When shutting down the unit for one month or more, first allow the fan mode to operate continuously for about one-half day to allow internal parts to dry thoroughly.

Cleaning the Air Filter

1. Open the Intake Grille, and remove the air filter.

Lift up the air filter's handle, disconnect the two lower tabs, and pull out.

Air filter handle



2. Remove dust with a vacuum cleaner or by washing.

After washing, allow to dry thoroughly in a shaded place.

3. Replace the Air Filter and close the Intake Grille.

- ① Align the sides of the air filter with the panel, and push in fully, making sure the two lower tabs are returned properly to their holes in the panel.



- ② Close the Intake Grille.

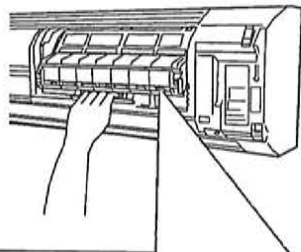
(For purposes of example, the illustration shows the unit without Intake Grille installed.)

- Dust can be cleaned from the air filter either with a vacuum cleaner, or by washing the filter in a solution of mild detergent and warm water. If you wash the filter, be sure to allow it to dry thoroughly in a shady place before re-installing.
- If dirt is allowed to accumulate on the air filter, air flow will be reduced, lowering operating efficiency and increasing noise.
- During periods of normal use, the Air Filters should be cleaned every two weeks.

Cleaning the dust collection unit

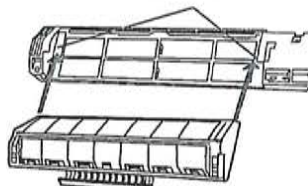
5. Install the unit.

(The above figure is only for reference, so the intake grille is not included.)

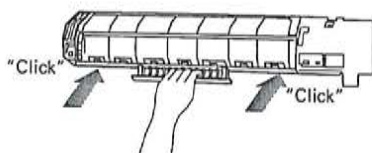


- ① Align the two ends of the dust collection unit with the guide rail and slide in.

Guide rail



- ② Slide in until it clicks.



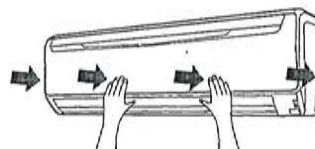
- Please ensure that the dust collection unit is completely dry before installing.
- After installing the dust collection unit, please ensure that it has been inserted fully into its place. If it has not been installed correctly, the OPERATION Indicator Lamp (red) and the TIMER Indicator Lamp (green) will flash, and Air Cleaning will stop.

6. Install the air filter.

- Please consult instructions for cleaning the air filter on page 12.

7. Close the intake grille.

Push the intake grill in at 4 points (the two ends of its lower side as well as two center points of the lower side, as shown in the figure) to close it.



Please ensure that the intake grille is closed properly.

- If, after cleaning the dust collection unit, the operation indicator lamp and the timer indicator lamp flash during Air Cleaning, please ensure that the unit is not damp and that the intake grille is properly closed.
- If, after having checked that the unit is fully dry and that the intake grille is closed properly, the indicator lamps continue to flash, the dust collection unit may be damaged. Please consult an authorised dealer to obtain a replacement.



WARNING!

- Be sure the Intake Grille (Fig. 4 ⑧) is installed securely.

TROUBLESHOOTING



WARNING!

In the event of a malfunction (burning smell, etc.), immediately stop operation, turn off the electrical breaker or disconnect the power supply plug, and consult authorized service personnel. Merely turning off the unit's power switch will not completely disconnect the unit from the power source. Always be sure to turn off the electrical breaker or disconnect the power supply plug to ensure that power is completely off.

Before requesting service, perform the following checks:

	Symptom	Problem	See Page
NORMAL FUNCTION	Doesn't operate immediately:	● If the unit is stopped and then immediately started again, the compressor will not operate for about 3 minutes, in order to prevent fuse blowouts. ● Whenever the Power Supply Plug is disconnected and then reconnected to a power outlet, the protection circuit will operate for about 3 minutes, preventing unit operation during that period.	—
	Noise is heard:	● During operation and immediately after stopping the unit, the sound of water flowing in the air conditioner's piping may be heard. Also, noise may be particularly noticeable for about 2 to 3 minutes after starting operation (sound of coolant flowing). ● During operation, a slight squeaking sound may be heard. This is the result of minute expansion and contraction of the front cover due to temperature changes.	—
		● During Heating operation, a sizzling sound may be heard occasional. This sound is produced by the Automatic Defrosting operation.	17
	Smells:	● Some smell may be emitted from the indoor unit. This smell is the result of room smells (furniture, tobacco, etc.) which have been taken into the air conditioner.	—
	Mist or steam are emitted:	● During Cooling or Dry operation, a thin mist may be seen emitted from the indoor unit. This results from the sudden Cooling of room air by the air emitted from the air conditioner, resulting in condensation and misting.	—
		● During Heating operation, the outdoor unit's fan may stop, and steam may be seen rising from the unit. This is due to Automatic Defrosting operation.	17
	Airflow is weak or stops:	● When Heating operation is started, fan speed is temporarily very low, to allow internal parts to warm up. ● During Heating operation, if the room temperature rises above the thermostat setting, the outdoor unit will stop, and the indoor unit will operate at very low fan speed. If you wish to warm the room further, set the thermostat for a higher setting.	—
		● During Heating operation, the unit will temporarily stop operation (between 7 and 15 minutes) as the Automatic Defrosting mode operates. During Automatic Defrosting operation, the OPERATION Indicator Lamp will flash.	17
		● The fan may operate at very low speed during Dry operation or when the unit is monitoring the room's temperature.	5
		● During SUPER QUIET operation, the fan will operate at very low speed.	5
		● In the monitor AUTO operation, the fan will operate at very low speed.	5
	Water is produced from the outdoor unit:	● During Heating operation, water may be produced from the outdoor unit due to Automatic Defrosting operation.	17
	The AIR CLEAN Indicator Lamp (orange) will begin to slowly flash (as shown in the figure):	● After approximately 400 hours of Air Cleaning Mode use, the AIR CLEAN Indicator Lamp will begin to flash slowly (as shown in the figure). When this occurs, please stop the system, remove the mains socket and carry out maintenance on the dust collecting unit's air filter.	13 - 14
	The AIR CLEAN Indicator Lamp (orange) will begin to flash quickly (as shown in the figure):	● After approximately 500 hours of Air Cleaning Mode use, the AIR CLEAN Indicator Lamp will begin to flash quickly (as shown in the figure). At this point, Air Cleaning will stop functioning. Please stop the system, remove the mains socket and carry out maintenance on the dust collecting unit's air filter.	13 - 14

OPERATING TIPS

Temperature and Humidity Range

	Cooling Mode	Dry Mode	Heating Mode
Outdoor temperature	About 0 to 115 °F	About 0 to 115 °F	About 0 to 75 °F
Indoor temperature	About 64 to 90 °F	About 64 to 90 °F	About 86 °F or less

- If the air conditioner is used under higher temperature conditioner than those listed, the built-in protection circuit may operate to prevent internal circuit damage. Also, during Cooling and Dry modes, if the unit is used under conditions of lower temperature than those listed above, the heat-exchanger may freeze, leading to water leakage and other damage.
- Do not use this unit for any purposes other than the Cooling, Dehumidifying, and air-circulation of rooms in ordinary dwellings.
- If the unit is used for long periods under high-humidity conditions, condensation may form on the surface of the indoor unit, and drip onto the floor or other objects underneath. (About 80% or more).
- If the outdoor temperature is lower than the temperature scope in the list above, in order to keep safety operation of device, the outdoor unit may stop operation for certain period of time.

TX Result Report

P 1

12/03/2009 10:51
Serial No. A02ED10004915
TC: 43631

Destination	Start Time	Time	Prints	Result	Note
19735898833	12-03 10:51	00:00:30	002/002	OK	

Note TMR: Timer TX, POL: Polling, ORG: Original Size Setting, FME: Frame Erase TX,
MIX: Mixed Original TX, CALL: Manual TX, CSRC: CSRC, FWD: Forward, PC: PC-Fax,
BND: Double-Sided Binding Direction, SP: Special Original, FCODE: F-Code, RTX: Re-TX,
RLY: Relay, MBX: Confidential, BUL: Bulletin, SIP: SIP Fax, IPADR: IP Address Fax,
I-FAX: Internet Fax

Result OK: Communication OK, S-OK: Stop Communication, PW-OFF: Power Switch OFF,
TEL: RX from TEL, NG: Other Error, Cont: Continue, No Ans: No Answer,
Refuse: Receipt Refused, Busy: Busy, M-Full: Memory Full,
LOVR: Receiving length Over, POVER: Receiving page Over, FIL: File Error,
DC: Decode Error, MDN: MDN Response Error, DSN: DSN Response Error.

ENICON MECHANICAL CORP

P.O. BOX 2293 - 3433 SUNSET AVENUE - OCEAN - NEW JERSEY 07712
PH 732-922-1305 FAX 732-922-0746

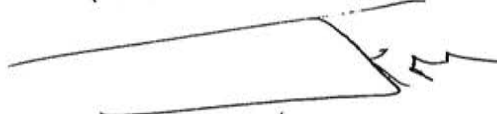
FAX COVER SHEET

DATE: 12/3/09 FAX # 973.589.8833
TO: Scott COMPANY: Iron Bond
FROM: J.M.
RE: PO & Repress Rental
Total Number of Pages (including coversheet) 2

Here's the order.

I'll have this picked up tomorrow and as soon
as I get the rental agreement I'll shot it right
back

Thanks



FUJITSU FUJITSU GENERAL

Worldwide

United States & Canada

Home

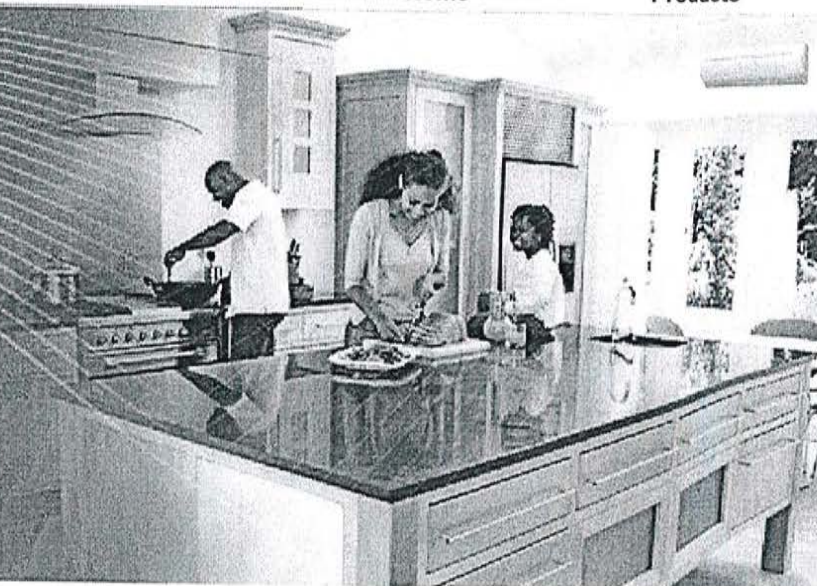
Products

Wall Mounted I.A.Q. Systems

Systems 24RLXQ, 30RLXQ

Click on a feature...

- ▶ Energy Efficiency
- ▶ Low Ambient Operation
- ▶ Installation Flexibility
- ▶ Indoor Air Quality



Products

- Wall Mounted
- Wall Mounted I.A.Q.
9 - 12,000 BTU
15 - 18,000 BTU
→ 24 - 30,000 BTU
- Multi-Zone
- Cassette
- Large Ceiling
- Universal Floor / Ceiling

Accessory Item

- Wired Remote Controller

Locate A Contractor

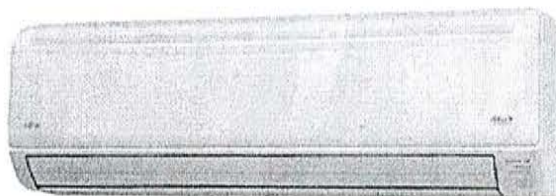


Clean Air. Breathe Easy.
Learn about the Plasma
Filter found in Wall
Mounted I.A.Q. Units



Products > Wall Mounted I.A.Q. 24 - 30,000 BTU

Wall Mounted



Indoor Unit

Systems: 24RLXQ, 30RLXQ

This category of equipment is ideal for medium to large spaces where it can conveniently condition a large open area within minutes. Residential applications including sunrooms and additions are made easier with these air conditioners and heat pumps. Do you have a warm spot in your home? Our mini-splits can provide extra cooling capacity for those hard to cool areas. Commercially, their small size makes them ideal for offices, providing individual temperature control.



Outdoor Unit

Systems: 24RLXQ, 30RLXQ

Ask Fujitsu

Need Pricing?
Contact a local contractor.

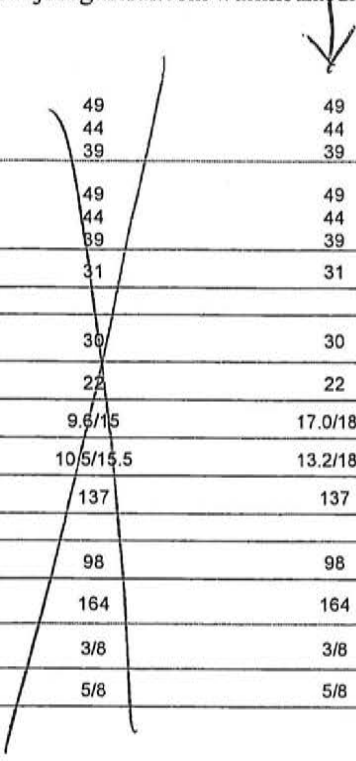
Features

Specifications

Dimensions

Downloads

SYSTEM	24RLXQ	30RLXQ
CAPACITIES:		
Cooling BTU/h	24,200	30,600
Outdoor Design Temp F° DB/WB	95/75	95/75
Heating BTU/h	27,600	32,000
Outdoor Design Temp F° DB/WB	47/43	47/43
SEER	17	15
EER Clg/Htg	11.1/11.6	7.9/10.7
HSPF	10	9.5
Power Supply (V)	208-230	208-230
INDOOR UNIT:		



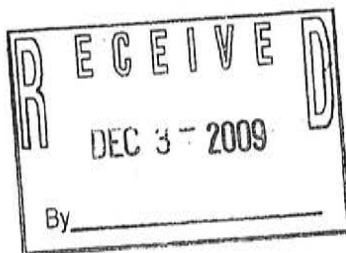
Noise Level db (A) <i>Cooling</i>		
<i>Hi</i>	49	49
<i>Med</i>	44	44
<i>Lo</i>	39	39
Noise Level db (A) <i>Heating</i>		
<i>Hi</i>	49	49
<i>Med</i>	44	44
<i>Lo</i>	39	39
Weight (lbs.)	31	31
OUTDOOR UNIT:		
Max Fuse Size (A)	30	30
Min. Ampacity (A)	22	22
Running Current Clg (A) <i>Rated/Max</i>	9.6/15	17.0/18.5
Running Current Htg (A) <i>Rated/Max</i>	10.5/15.5	13.2/18.5
Weight (lbs.)	137	137
REFRIGERANT PIPING:		
Max Ht. Difference (ft.)	98	98
Max Total or Combined Length (ft.)	164	164
Discharge Vapor Line (O.D.) inches	3/8	3/8
Suction (O.D.) inches	5/8	5/8

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WASHINGTON TWP CONSTRUCTION OFFICE

FILE COPY



WASHINGTON TWP. CONSTRUCTION OFFICE

PLAN REVIEW # 09-199 / DATE REC. _____

BUILDING _____ DATE _____

ELECTRIC _____ DATE 12-10-09

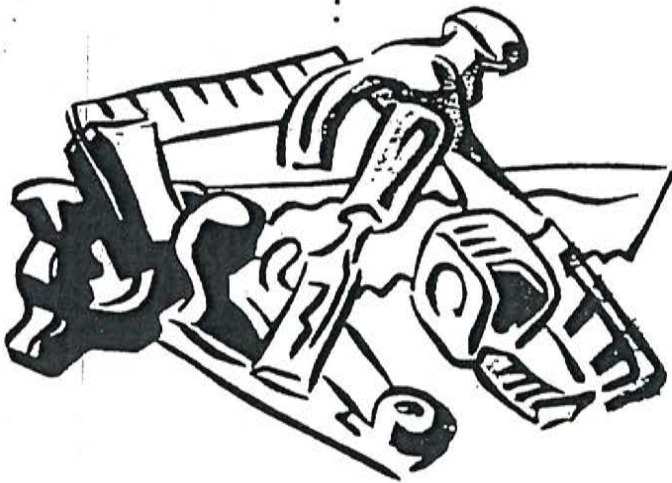
PLUMBING _____ DATE 12-9-09

FIRE _____

ELEVATOR _____

CONST. OFF. _____ 12/11/09

PLAN RELEASED ON: _____ SUBJECT TO FIELD INSPECTION



(856) 256-0234
(856) 589-0520 Ext. 250
Fax: (856) 218-1473

Joe Wille
Electric Subcode Official

Municipal Building
523 Egg Harbor Road
Sewell, NJ 08080

Mailing Address:
P.O. Box 1106
Turnersville, NJ 08012

Facsimile transmittal

To: *Cherry Hill E* Fax: *856-627-5335*

From: *Joe Wille* Date: *10.2.06*

Re: *75HP Pump* Pages: *3*

CC:

☐ Urgent

☐ For Review

☐ Please Comment

☐ Please Reply

☐ Please Recycle

Per Attached why is the 75HP Pump motor not listed in tech!

Joe

.....



Amsted
INDUSTRIES

BALTIMORE AIRCOIL COMPANY

Submittal Data Form

July 26, 2006

Your P. O. Number: 13695

Our B.A.C. Number: U065958201

Sold To: B. J. Kilpatrick
136 S. White Horse Pike
Berlin, NJ 08009

Project: Sun National Bank -- Turnersville, NJ

Engineer:
Representative: James R. McQuaide Inc.
(BX18369)

One (1) Model VF1-027-32K/H Closed Circuit Cooling Tower Unit

All Information is Per Unit

Certified Capacity: 101 USGPM of Water from 95°F to 85°F at 78°F entering air wet bulb and 6.35 PSIG fluid pressure drop.

Fan Motor(s): One (1) 10 HP fan motor: totally-enclosed, fan-cooled (TEFC), one-speed, one-winding, suitable for 200 volt, 3 phase, 60 hertz electrical service. Fan drives are based on 0 inches ESP.

Pump(s): (1) .75 HP pump motor, totally-enclosed, fan-cooled (TEFC), one-speed, one-winding, suitable for 200 volts, 3 phase, 60 hertz.

Submittal Information	Equipment Summary
BAC Terms and Conditions of Sale Mechanical Specifications Submittal Drawings/Diagrams Unit Print - Right Hand (BAC-11601A) Steel Support (BAC-15839A) Heater Location (BAC-10183A) Heater Wiring (BAC-6988 B) Positive Closure Damper Wiring (BAC-9803 B)	• CTI Certified Thermal Performance • Steel Panels and Structural Members are Constructed of Galvanized Steel • Galvanized Steel Fan Wheel(s) • Galvanized Steel Coil • Polyvinyl Chloride (PVC) Drift Eliminators • End Outlet for Integral Pump • Close-Coupled Centrifugal Spray Water Pump with Electrical Requirements Matching Fan Motor(s) • PVC Spray Distribution Branches • Electric Immersion Heaters Sized to Maintain +40°F water at a 0°F Ambient with Electrical Requirements Matching Fan Motor(s) • Electric Immersion Heater Controls • Mechanical Float Valve Assembly • Tapered Discharge Hood Constructed of Galvanized Steel with Galvanized Positive Closure Dampers and Damper Actuator See Mechanical Specifications & Drawings for more detail.

Thank you for your order. An approved submittal is not required.

Current Rigging and Installation Instructions, as well as Operating and Maintenance Instructions, are available at our website: www.baltimoreaircoil.com.

CC: James R. McQuaide Inc.

RECEIVED
SEP 28 2006



ELECTRICAL
SUBCODE
TECHNICAL SECTION

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

Block 115.04 Lot 72 Qualification Code

Work Site Location 4651 13742 Sun national Bank Turnerville, NJ.

Owner in Fee 226 Sandy Ave
Address Vanlande, NJ

Tel () Cherry Hill Electric, Inc.
Contractor 14 Democrat Way Ste 16
Address Gibbsboro, NJ 08026

Tel (856) 627-7709 FAX (856) 627-5335

Contractor License No. 12916
Federal Emp. No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[] Pole/Pad # [] Temporary [] Other

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 4,000.00

JOB SUMMARY (Office Use Only)			
PLAN REVIEW	Date	Initial	Dates (Month/Day)
[] No Plans Required			Failure Approval Initial
Joint Plan Review Required:			
[] Building [] Plumbing			
[] Fire [] Elevator			
[] Elec. Plans Approved			
Date: _____			
Approved by: _____			
SUBCODE APPROVAL			
[] CO [] CCO [] CA			
Date: _____			
Approved by: _____			
Date of Grounding and Bonding Certification			

1. White-Inspector copy
2. Canary-Applicant copy
3. Pink- Office Copy
4. White Tag- Office copy



Date Received
Date Issued
Control #
Permit #

06-2298

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature
Mark Muzia

[X] Licensed Elec. Contractor [] Certifd Landscape Irrigation Contr [] Exempt Ap

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
1		Lighting Fixtures
		Receptacles
		Switches
		Detectors
1		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel

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	
KW Transformer/Generator	
AMP Service	
AMP Subpanels	
AMP Motor Control Center	
KW Elec. Sign/Outline Light	
2 KW	Electric Heat-Tank

36

10

10

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

UCC/F-120 (REV. 7/03)
Professional Printing
(856) 468-7933



ELECTRICAL
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 115-04 Lot 12 Qualification Code _____

Work Site Location 540 National Bank rd.

Owner in Fee 226 Landis Ave

Address Clarendon, NJ

Tel () _____

Contractor Cherry Hill Electric, Inc

Address 14 Democrat Way Ste 16

Gibbstown, NJ 08026

Tel (856) 627-7700 FAX (856) 627-5335

Contractor License No. 12916

Federal Emp. No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 4,000.00

JOB SUMMARY (Office Use Only)			
PLAN REVIEW	Date	Initial	INSPECTIONS
[] No Plans Required			Dates (Month/Day)
Joint Plan Review Required:			Failure
[] Building [] Plumbing			Approval
[] Fire [] Elevator			Initial
[] Elec. Plans Approved			
Date: <u>12/20/06</u>			
Approved by: _____			
SUBCODE APPROVAL			
[] CO [] CCO [] CA			
Date: _____			
Approved by: _____			

1. White-Inspector copy
2. Canary- Applicant copy
3. Pink- Office Copy
4. White Tag- Office copy



Date Received 11-22-06
Date Issued _____
Control # _____
Permit # 06-2298

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 Elec. Contractor [] Certifd Landscape Irrigation Contr'r [] Exempt Applicant

D. TECHNICAL SITE DATA

QTY. SIZE ITEMS

Lighting Fixtures _____

Receptacles _____

Switches _____

Detectors _____

Light Poles _____

Motors—Fract. HP _____

Emergency & Exit Lights _____

Communications Points _____

Alarm Devices/F.A.C. Panel _____

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 1/4 HP _____

KW Transformer/Generator _____

AMP Service _____

AMP Subpanels _____

AMP Motor Control Center _____

KW Elec. Sign/Outline Light _____

1 2kw Electric Heat-Tank

FEE (Office Use Only) \$ 36

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ 56-

UCC/F-120 (REV. 7/03)
Professional Printing
(856) 468-7933



TECHNICAL SECTION

Block 115.04 Lot 18
Work Site Location San Antonio Bank
4601 Rt. 42 Traversville, Md.
Owner in Fee _____
Address 226 Pandia Ave
Vineland, N.J.
Tele. () _____
Contractor B.T. Kilpatrick Inc.
Address 136 S. White Horse Pk.
Dorlin N.J.
Tele. (256) 718-4747 Fax (256) 768-5783
Lic. No. _____
Federal Emp. No. _____

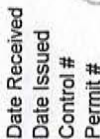
	Use Group	Present	Proposed
	Building Sewer Size		Public Sewer
	Water Service Size		Public Water
	Est. Cost of Plumbing Work	\$ 2,050	Private Well

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)	
☐ No Plans Required	Type:	Failure	Approval	Initial	
Joint Plan Review Required:					
☐ Building	☐ Electric				
☐ Fire	☐ Elevator				
☐ Plumbing Plans Approved					
Date: 12-2	Fixtures				
Approved by: [Signature]	Gas Equipment				
	Gas Piping				
	Solar				
	TCO				
SUBCODE APPROVAL					
☐ CO	☐ CCO				
☐ CA					
Date:					
Approved by:					

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's Seal

Contractor	Licensed Plumbing Contractor	Exempt Applicant
1		
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Date Received
Date Issued
Control #
Permit #

D. TECHNICAL SITE DATA (List of all fixtures.)

NO. FIXTURE/EQUIPMENT

Water Closet	
Urinal/Bidet	
Bath Tub	
Lavatory	
Shower	
Floor Drain	
Sink	
Dishwasher	
Drinking Fountain	
Washing Machine	
Hose Bibb	
Water Heater	
Fuel Oil Piping	
Gas Piping	
Steam Boiler	
Hot Water Boiler	
Sewer Pump	
Interceptor/Separator	
Backflow Preventer	1
Greasetrap	
Sewer Connection	
Water Service Connection	
Stacks	
Other Cooling	✓
Other Refrigeration	
Other	

Administrative Surcharge	\$
Minimum Fee	\$
DCA Training Fee	\$
TOTAL FEE	\$

FEE (Office Use Only)

65

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

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

Township of Washington
Municipal Building
Turnersville, NJ 08012
(856)256-0234 FAX (856)218-1473

Permit No. **20062298**
Parcel(Block/Lot)**115.04/12.**
Date

Construction Permit

Work Site Location 4651 ROUTE 42
Owner in Fee..... SUN NATIONAL BANK
Address..... 226 LANDIS AVE
VINELAND, NJ, 08360
Phone

Contractor..... BJ KILPATRICK, INC.
Address..... 136 S WHITE HORSE PIKE
BERLIN, NJ 08009
Phone..... 8567684747
Lic No. Or Bld Reg No. _____
Fed Emp No.

Permission is hereby granted to do the following work:

- | | | |
|--|--|--|
| ☐ BUILDING | ☒ PLUMBING | ☐ LEAD HAZARD ABATEMENT |
| ☒ ELECTRIC | ☐ FIRE | ☐ DEMOLITION |
| ☐ ELEVATOR | ☐ ASBESTOS ABATEMENT | ☐ OTHER |
| | | ☐ Mechanical |

Description of Work:

REPLACE COOLING TOWER

Note: If construction does not commence within one (1) year of the date of issuance or if construction ceases for a period of six(6) months, this permit is Void.

Estimated Cost of Work: \$6,000


Construction Official _____ Date 11-21-06

*Failure to obtain all required inspections may result in administrative action
Final inspections are required before final payment is to be made to contractor
An approved set of plans must be kept at the worksite at all times*

Municipality Copy/Applicant Copy

PAYMENTS (Office Use Only)

Building	\$0
Electrical	56
Plumbing	130
Fire Protection	0
Elevator Devices	0
Other	0
State Training Fee	8
Certificate of Occupancy	0
Other	0
Total	<u>\$194</u>

Check#/5450
Paid 194
Collected By jm
11-22-06



BALTIMORE AIRCOIL COMPANY
Submittal Data Form

July 26, 2006

Your P. O. Number: 13695

Our B.A.C. Number: U065958201

Sold To: B. J. Kilpatrick
136 S. White Horse Pike
Berlin, NJ 08009

Project: Sun National Bank -- Turnersville, NJ

Engineer:
Representative: James R. McQuaide Inc.
(BX18369)

One (1) Model VF1-027-32K/H Closed Circuit Cooling Tower Unit
All Information is Per Unit

Certified Capacity: 101 USGPM of Water from 95°F to 85°F at 78°F entering air wet bulb and 6.35 PSIG fluid pressure drop.

Fan Motor(s): One (1) 10 HP fan motor: totally-enclosed, fan-cooled (TEFC), one-speed, one-winding, suitable for 200 volt, 3 phase, 60 hertz electrical service. Fan drives are based on 0 inches ESP.

Pump(s): (1) .75 HP pump motor, totally-enclosed, fan-cooled (TEFC), one-speed, one-winding, suitable for 200 volts, 3 phase, 60 hertz.

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Thank you for your order. An approved submittal is not required.

Current Rigging and Installation Instructions, as well as Operating and Maintenance Instructions, are available at our website: www.baltimoreaircoil.com.

CC: James R. McQuaide Inc.



Baltimore Aircoil Company Terms and Conditions of Sale

Pricing: Prices set forth in Seller's quotation shall remain firm for thirty (30) days. Within such period, the quotation shall convert into an order provided that all of the following have occurred: (1) Buyer submits either a purchase order or a copy of Seller's quotation displaying an authorized signature of Buyer within that thirty (30)-day period; (2) Buyer provides a release for fabrication; and (3) Buyer requests a shipment date that is no later than twelve (12) weeks from the date of Buyer's submission of a purchase order or signed quotation. In the event Buyer's requested shipment date is later than twelve (12) weeks beyond such submission date, Seller's price in effect twelve (12) weeks prior to such shipment date shall apply. In the event that Buyer requests for its convenience that Seller delay delivery of products subject to an order beyond the scheduled shipment date, pricing shall be subject to the same adjustment.

Payments: Terms of payment shall be net cash in thirty (30) days from date of invoice, subject to Seller's prior credit approval. If the Buyer shall fail to make any payments in accordance with the terms and conditions of sale, the Seller, in addition to its other rights and remedies but not in limitation thereof, may, at its option, without prior notice, cancel this order as to any undelivered products or defer shipments or deliveries hereunder, or under any other agreement between Buyer and Seller, except upon Seller's receipt of cash before shipment or such security as Seller considers satisfactory. Seller reserves the right to impose an interest charge (not exceeding the lawful maximum) on the balance of each invoice not paid on its due date for the period from the due date to the date of receipt of payment by Seller. In the event Buyer's failure to make timely payments to Seller results in Seller incurring additional costs, including but not limited to collection expenses and attorneys' fees, said costs shall be added to the amount due Seller from Buyer. Buyer shall have no right to any discount or retainage and shall not withhold payment as a set-off on Seller's invoice in any amount.

Taxes: Unless listed on the front (reverse) side of this document, prices do not include any federal, state or local sales, use or value-added taxes payable in connection with this order. All such taxes shall be paid by Buyer. Buyer shall indemnify Seller from and against such taxes, plus interest and penalties thereon, including, but not limited to, tax, interest and penalties resulting from a failure to collect such taxes because of Seller's reliance upon an invalid exemption certificate provided to Seller.

Allocation of Risk: Deliveries shall be considered made when the products subject to this order are loaded on the carrier. At such time, title to the goods and all risk of loss, damage or shortage shall pass to Buyer, and any claims based thereon must be filed by Buyer with the carrier.

Force Majeure: Seller shall under no circumstances be liable for any loss or damage resulting from delay or failure in the performance of its obligations under this contract to the extent that such performance is delayed or prevented by: fires, floods, war, terrorist activities, riots, strikes, freight embargoes or transportation delays, shortage of labor, inability to secure fuel, material, supplies or power at current prices, or on account of shortages thereof; acts of God or of the public enemy; any existing or future laws or acts of the federal, state or local government (including specifically, but not exclusively, any orders, rules or regulations issued by any official or agency of any such government) affecting the conduct of Seller's business with which Seller in its judgment and discretion deems it advisable to comply as a legal or patriotic duty, or to any case beyond the Seller's reasonable control.

Warranties: Seller warrants that the equipment products sold under this contract shall be free from defects in material and workmanship for a period of twelve (12) months from the date of equipment startup or eighteen (18) months from the date of shipment, whichever occurs first. The following original equipment components only are warranted against defects in materials and workmanship for a period of five (5) years from date of shipment: fans, fan shafts, bearings, sheaves, gearboxes, driveshafts, couplings, mechanical equipment supports and fan motors. Replacement parts provided by Seller under its original equipment warranty obligations are warranted against defects in materials and workmanship for a period of twelve (12) months from date of shipment or until expiration of their original warranty, whichever is the first to occur. Parts purchased after expiration of the warranty on the original parts they replace (including those parts originally warranted for a five (5) year period) are warranted against defects in materials and workmanship for a period of twelve (12) months from date of shipment. Written notice of any defect shall be given to Seller immediately upon discovery by Buyer, and shall fully describe the claimed defect. Defective parts shall be repaired or replaced F.O.B. point of shipment, provided that inspection by Seller verifies the claimed defect(s). This shall be Buyer's exclusive remedy. **This warranty does not cover the costs of removing, shipping or reinstalling the equipment. Repairs made without the prior written approval of Seller shall void all**

warranties covering material and workmanship. Any descriptions of the product(s) in the contract are for the sole purpose of identification and do not constitute a warranty. In the interest of product improvement, Seller reserves the right to change specifications and product design without incurring any liability therefore. The foregoing express warranties or those set forth elsewhere on this document are the only warranties of Seller applicable to the product(s) sold under this contract. **All other warranties, whether verbal or written, and all warranties implied by law, including any warranties of merchantability or fitness for a particular purpose, are hereby excluded.** Failure on the part of Buyer or of other parties to properly maintain the product(s) sold under this contract, or the operation of such product(s), by Buyer and/or other parties under conditions more severe than those for which such product(s) were designed, shall void all warranties covering materials and workmanship. Seller's warranties do not apply to defects in product(s) for which payment in full has not been received by Seller, and said warranties do not cover normal wear and tear or the erosion, corrosion and/or deterioration of the product(s) from unusual causes. **No warranties by Seller shall apply to accessories manufactured by others,** inasmuch as they are warranted separately by their respective manufacturers, except as stated above. Buyer assumes liability for and shall bear the costs of compliance with all laws, regulations, codes standards or ordinances applicable to the location, operation and maintenance of the product(s) sold under this contract, including those requirements pertaining to the distances between such product(s) and air-conditioning system duct intakes. No representative or agent of Seller is authorized to enlarge upon the express warranties of Seller.

Cancellation/Changes/Returns: Cancellation of or changes in any order by Buyer shall not be effective without Buyer's notice thereof received, agreed to, and confirmed in writing by Seller. If Seller, in its absolute discretion, approves Buyer's cancellation of an order, Buyer agrees to pay a reasonable cancellation charge. Seller's prior written consent must be obtained before Buyer returns any products, and when so returned will be subject to a handling charge and transportation costs payable by Buyer.

Liability/Indemnification: Seller shall not be liable for any damages caused by delay in delivery of the products. Buyer shall hold harmless and indemnify Seller from and against all liability, claims, losses, damages, and expenses (including attorneys' fees) for personal injury and property damage arising out of Buyer's improper unloading, handling, or use of the products subject to this order, and for Buyer's infringement of another's property rights. The Seller's maximum liability from any cause whatsoever, whether in breach of contract, tort (including negligence), strict liability, or otherwise, shall not exceed the contract price. Neither Buyer nor Seller shall in any event be liable to the other, whether such liability arises out of breach of contract, tort (including negligence), strict liability or any other cause or form of action, for any consequential, special, indirect or incidental damages, including but not limited to loss of actual or anticipated profits or loss of use arising out of this contract, other than such damages resulting from the willful misconduct of Buyer or Seller.

Government Contracts: If Buyer's purchase order is for products to be used in the performance of a U.S. Government contract, those clauses of applicable procurement regulations mandatorily required by federal law to be included in U.S. Government subcontracts shall be incorporated herein by reference.

Export Transactions: Buyer shall comply with all applicable export laws and regulations of the U.S. Government, and shall hold harmless and indemnify Seller from and against all liability, damages, and expenses (including attorneys' fees) incurred by Seller as a result of Buyer's violation of any U.S. Government export and/or international antiboycott laws or regulations.

Agreement of Sale: Buyer's order is accepted on the terms and conditions stated herein and Seller's acceptance of Buyer's order is expressly made conditional upon Buyer's assent to such terms and conditions, including any of Seller's terms and conditions which may be additional to or different from those contained in Buyer's purchase order or otherwise. Such assent shall be deemed to have been given unless written notice of objection to any such terms and conditions (including inconsistencies between Buyer's purchase order and this acceptance) is given by Buyer to Seller promptly upon receipt of this acknowledgment. Any agreement or understanding, oral or written, which modifies or waives the terms and conditions herein (whether contained in Buyer's purchase order or other documentation) shall be deemed material and shall be rejected unless hereafter agreed to in writing and signed by Seller's authorized officer. Waiver by Seller of any breach or default hereunder shall not be deemed a waiver by Seller of any other or subsequent breach or default which may thereafter occur. Neither the rights nor the obligations of either Buyer or Seller are assignable without the prior written consent of the other party. This agreement of sale and all rights and obligations of Buyer and Seller shall be governed by and construed in accordance with the laws of the State of Maryland.

(Revision – 03/15/2004)



Baltimore Aircoil Company Mechanical Specifications



07/26/2006

Project: Sun National Bank
Customer: B. J. Kilpatrick
Purchase Order No.: 13695
Engineer:
Model: One (1) Model VF1-027-32K/H Closed Circuit Cooling Tower Unit
B.A.C. Serial No.: U065958201

All Information is Per Unit

Unit Type:

Factory-assembled, counterflow, forced draft design closed circuit cooling tower.

Quality Assurance:

Each unit is manufactured under closely-controlled conditions using standardized parts to ensure each unit is built precisely to the same high-quality design and construction standards. The design, manufacture, and business processes of Baltimore Aircoil Company are ISO 9001:2000 certified.

Fan Motor:

One (1) 10 HP fan motor: totally-enclosed, fan-cooled (TEFC), one-speed, one-winding, suitable for 200 volt, 3 phase, 60 hertz electrical service.

CTI Certification:

The thermal performance is certified by the Cooling Technology Institute in accordance with CTI Certification Standard STD-201.

Materials of Construction:

Water-contacted metal components are constructed of G-235 (Z700 metric) hot-dip galvanized steel. Circular access doors provided for interior inspection, cleaning, and adjustments are constructed of G-235 (Z700 metric) hot-dip galvanized steel and are held in place with phenolic knob screws. The heat transfer casing section(s) is (are) removable from the pan/fan section to facilitate rigging.

The circulating water is distributed over the coil surface via a schedule 40 PVC spray header and removable branches (except 3' box) with 360° large orifice plastic spray nozzles which are held in place with snap-in rubber grommets.

The centrifugal fans and motors are located in the dry entering airstream beneath the sloping side of the pan. G-235 (Z700 metric) hot-dip galvanized steel fan discharge cowls are provided on each fan. They extend within the pan to protect the fans from falling water. G-235 (Z700 metric) hot-dip galvanized steel fan guard screens are provided.

A solid fan shaft of ground and polished steel with exposed surface coated with a rust preventative is utilized. Self-aligning, heavy-duty, grease-packed, ball bearings with eccentric locking collars are provided on each end of the fan shaft. Where intermediate bearings are required, self-aligning, oil lubricated, sleeve type bearings with split, cast iron, pillow-block housing are furnished.

V-belt sheaves, selected for 150% motor nameplate horsepower, are mounted and aligned at the factory. The fan(s), fan shaft(s), bearings, mechanical equipment support and fan motors are warranted against defects in materials and workmanship for five (5) years from date of shipment.

Fan Wheel Material:

Forwardly curved, centrifugal, squirrel cage type fan wheels, constructed from G-235 (Z700 metric) hot-dip galvanized steel, are statically and dynamically balanced. Fan housings have curved inlet rings for efficient air entry.

Coil Type:

For single coil Series V model(s), coil(s) will be configured in an internally circuited arrangement. For dual coil Series V model(s), coil(s) will be configured in an external circuited arrangement with two coil segments joined by an external crossover pipe to allow the fluid to flow through the two segments in series. Coils(s) will be 1.05" O.D. all prime surface steel tubes encased in steel framework with entire assembly hot-dip galvanized after fabrication. Tubes will be sloped for liquid drainage. Coil(s) will be pressure tested at 375 psig (2685kPa) air pressure under water.

Drift Eliminators:

Drift eliminators are constructed of polyvinyl chloride (PVC), and are removable in easily handled sections. They impart three distinct changes in air direction to effectively strip entrained moisture from the leaving airstream with minimum air resistance.

Water Outlet:

The spray water outlet is a pipe stub, sized for pump suction, and located at the standard pump suction location. A large area lift out strainer screen matching the cold water basin material of construction is included with an anti-vortexing hood to prevent air entrainment.

Spray Water Pump Assembly:

A close-coupled, bronze-fitted pump with a mechanical seal is mounted on the pan. The pump motor is totally enclosed, fan cooled (TEFC). A water bleed line with a metering valve to control the bleed rate is installed between the pump discharge and the overflow connection. The external circulating water piping matches the material of construction of the internal spray piping.

Spray Piping:

Schedule 40 PVC spray header with removable branches (except 3' box) and 360° spray pattern plastic spray nozzles are held in place with snap-in rubber grommets.

Basin Heaters:

A minimum number of high-watt-density electric immersion heater elements, sized to maintain +40°F (+4°C) basin water at 0°F (-18°C) ambient with a 10 mph (16 km/h) wind speed, is provided. Wiring is not included.

Basin Heater Controls:

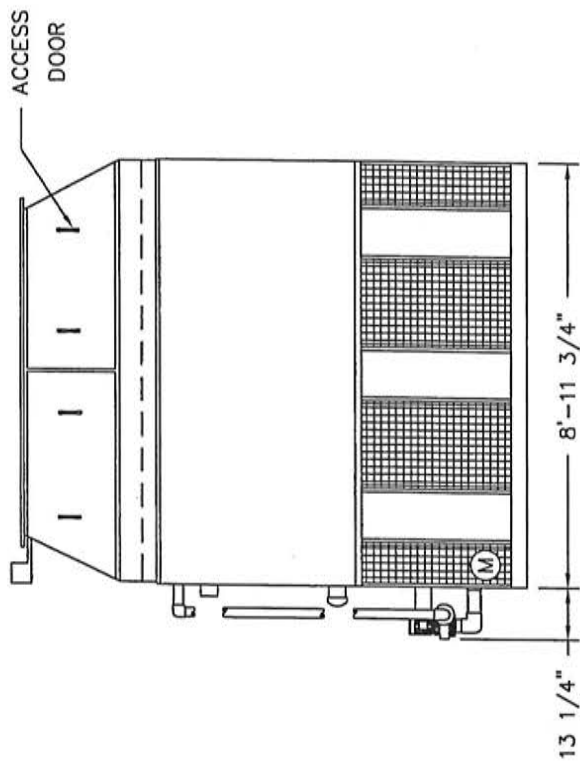
An electric immersion heater control package, including thermostat(s) and low water cutout switch(es) or probe(s), is provided. Disconnect switch, contactor, and wiring are not included.

Basin Water Level Control:

Bronze make-up valve with unsinkable polystyrene filled plastic float arranged for easy adjustment. The make-up valve is suitable for water supply pressures between 15 psig (103 kPa) and 50 psig (345 kPa).

Air Discharge Configuration:

Tapered discharge hood is constructed of G-235 (Z700 metric) hot-dip galvanized steel. The hood(s) includes access doors and galvanized positive closure dampers (PCD's) with damper actuator(s).



Ⓜ FAN MOTOR LOCATION.

MODEL NO.	APPROX. SHIPPING WEIGHT	APPROX. OPERATING WEIGHT	HEAVIEST SECTION (COIL)	F	H
VF1-027-22	4160	5200	2470	33 1/4"	10'-7 7/8"
VF1-027-32K/H	4590	5780	2850	42 1/2"	11'-4 5/8"
VF1-027-42	4980	6310	3240	51 3/4"	12'-2 3/8"

1. ALL DIMENSIONS ARE IN FEET AND INCHES. WEIGHTS ARE IN POUNDS.
2. UNLESS OTHERWISE INDICATED, ALL CONNECTIONS 6 INCHES AND SMALLER ARE MPT AND CONNECTIONS 8 INCHES AND LARGER ARE BEVELED FOR WELDING AND GROOVED FOR VICTAULIC CONNECTION.
3. DIMENSIONS SHOWING LOCATION OF COIL CONNECTIONS ARE APPROXIMATE AND SHOULD NOT BE USED FOR PREFABRICATION OF CONNECTING PIPING.
4. FOR SUPPORT REQUIREMENTS, REFER TO THE SUGGESTED STEEL SUPPORT DRAWING.

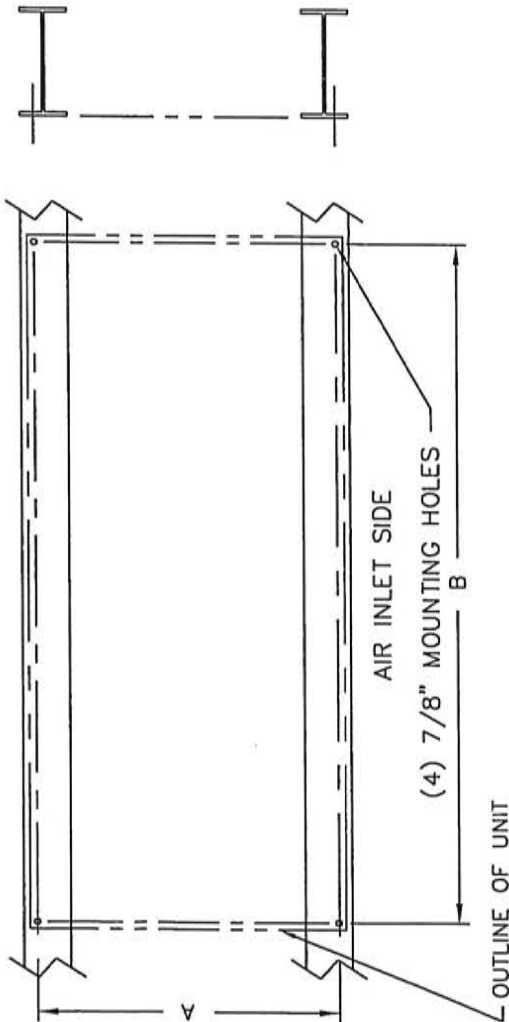


BALTIMORE AIRCOIL
COMPANY

RIGHT HAND UNIT
END OUTLET WITH PUMP
TAPERED HOOD WITH PCO'S

DRAWING NUMBER:
BAC-11601A

DATE: 07/26/06



NOTES:

1. THE RECOMMENDED SUPPORT ARRANGEMENT FOR VF1 UNITS CONSISTS OF TWO PARALLEL I-BEAMS EXTENDING THE FULL LENGTH OF THE UNIT. SUPPORTS AND ANCHOR BOLTS ARE TO BE DESIGNED AND FURNISHED BY OTHERS.
2. ALL SUPPORTING BEAMS ARE TO BE FLUSH AND LEVEL AT TOP AND MUST BE ORIENTED RELATIVE TO GAGE LINE AS SHOWN.
3. RECOMMENDED DESIGN LOADS FOR EACH BEAM SHOULD BE 70% OF THE TOTAL UNIT OPERATING WEIGHT APPLIED AS A UNIFORM LOAD TO EACH BEAM. BEAMS SHOULD BE DESIGNED IN ACCORDANCE WITH STANDARD STRUCTURAL PRACTICE. THE MAXIMUM ALLOWABLE DEFLECTION OF BEAMS UNDER THE UNIT SHALL BE $\frac{1}{8}$ " (REFER TO CHART) OF AN INCH.
4. ALL MOUNTING HOLES ARE $\frac{7}{8}$ " DIAMETER. AT THE LOCATIONS SHOWN.
5. IF VIBRATION ISOLATORS ARE USED, A RAIL OR CHANNEL MUST BE PROVIDED BETWEEN THE UNIT AND THE ISOLATORS TO PROVIDE CONTINUOUS UNIT SUPPORT. ADDITIONALLY THE SUPPORT BEAMS MUST BE DESIGNED TO ACCOMMODATE THE OVERALL LENGTH AND MOUNTING HOLE LOCATION OF THE ISOLATORS WHICH MAY DIFFER FROM THOSE OF THE UNIT. REFER TO VIBRATION ISOLATOR DRAWINGS FOR THESE DATA.

MODEL NO.	DIMENSION		*
	A	B	
VF1-009-12 VF1-009-22 VF1-009-32 VF1-009-42	45 3/8"	29 1/2"	3/32"
VF1-018-02 VF1-018-12 VF1-018-22 VF1-018-32 VF1-018-42	45 3/8"	65 1/2"	3/16"
VF1-027-21 VF1-027-22 VF1-027-31 VF1-027-32 VF1-027-41 VF1-027-42	45 3/8"	101 1/4"	5/16"
VF1-036-21 VF1-036-22 VF1-036-31 VF1-036-32 VF1-036-41 VF1-036-42 VF1-036-51	45 3/8"	137 1/2"	3/8"
VF1-048-21 VF1-048-22 VF1-048-31 VF1-048-32 VF1-048-41 VF1-048-42	54 1/4"	137 1/2"	3/8"

B.A.C.
ORDER NO: U065958201

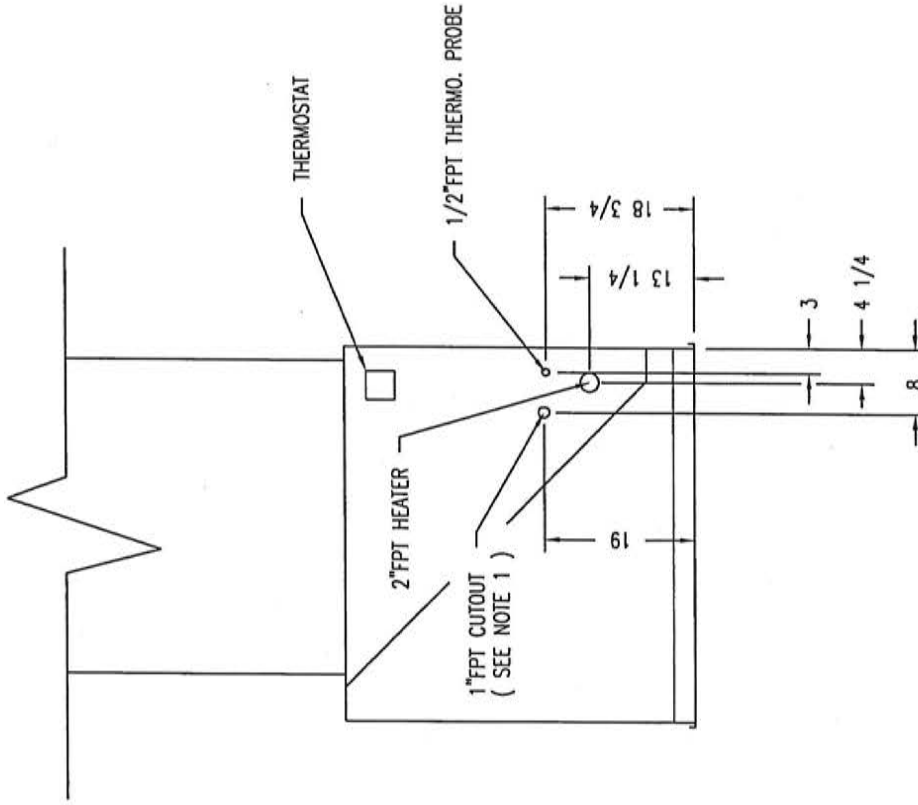
 **BALTIMORE AIRCOIL
COMPANY**

SUGGESTED STEEL SUPPORT
FOR VF1 UNITS

DATE: 07/26/06

DRAWING NUMBER:
BAC-15839A

-



NOTES:

1. OMIT THE 1\"FPT CUTOUT LOCATION WHEN AN ELECTRIC WATER LEVEL CONTROL PACKAGE IS USED. THE LOW WATER CUTOUT WILL BE FURNISHED AS PART OF THE ELECTRIC WATER LEVEL CONTROL PACKAGE.

HEATERS: SUITABLE 200 VOLTS, 3 PHASE, 60 HERTZ, 0°F AMBIENT TEMPERATURE

MODEL #'S	# OF HEATERS	KW. EACH
VF1-009-12 THRU VF1-009-42	1	2
VF1-018-02 THRU VF1-018-42	1	2
VF1-027-21 THRU VF1-027-42	1	2
VF1-036-21 THRU VF1-036-42	1	3



END OPPOSITE PIPING CONNECTION

RIGHT HAND UNIT SHOWN,
LEFT HAND UNIT MIRROR IMAGE

B.A.C.
ORDER NO: U065958201

DATE: 07/26/06

 **BALTIMORE AIRCOIL
COMPANY**

INDUSTRIAL FLUID COOLER
ELECTRIC HEATER PACKAGE

DRAWING NUMBER:
BAC-10183A

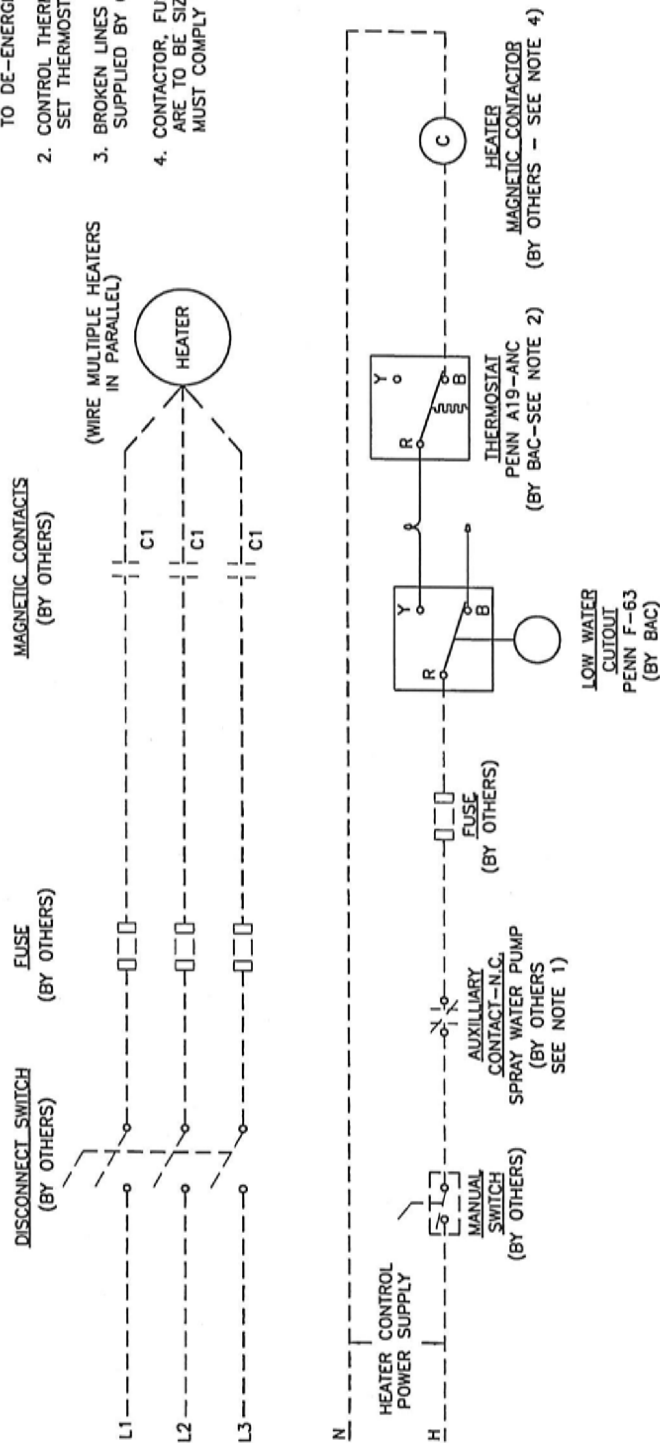
NOTES:

1. INTERLOCK IMMERSION HEATERS WITH CIRCULATING PUMP TO DE-ENERGIZE HEATERS WHEN PUMP IS RUNNING.

2. CONTROL THERMOSTAT IS TO BE SET FOR 40° F. DO NOT SET THERMOSTAT LOWER THAN 40° F.

3. BROKEN LINES INDICATE COMPONENTS AND WIRING TO BE SUPPLIED BY OTHERS.

4. CONTACTOR, FUSE PROTECTION AND POWER SUPPLY WIRING ARE TO BE SIZED TO MATCH HEATER REQUIREMENTS. WIRING MUST COMPLY TO APPLICABLE CODES AND ORDINANCES.



B.A.C.
ORDER NO: U065958201

DATE: 07/26/06



**BALTIMORE AIRCOIL
COMPANY**

ELECTRIC IMMERSION HEATER
PACKAGE THREE PHASE

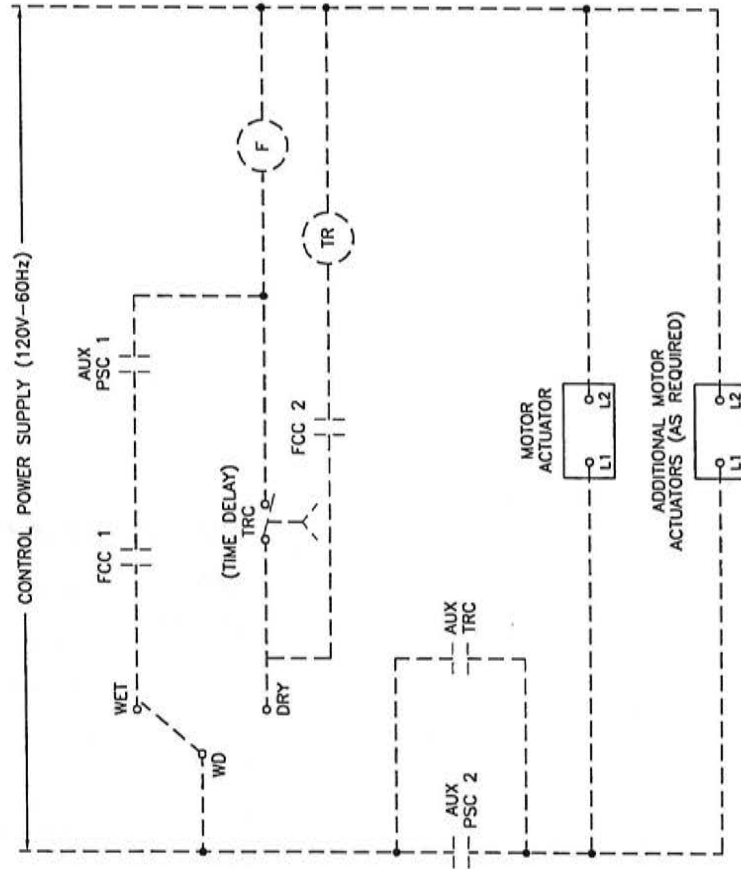
**ELECTRIC HEATER
WIRING DIAGRAM**

DRAWING NUMBER:
BAC-6988 B

THE PURPOSE OF THE POSITIVE CLOSURE DAMPER HOOD IS TO REDUCE HEAT LOSS FROM THE COIL DURING NO LOAD CONDITION.

FOR WET OPERATION, THE RECOMMENDED METHOD OF CONTROLLING THE DAMPER MOTOR ACTUATOR IS TO INTERLOCK IT WITH THE UNIT SPRAY PUMP. AS SHOWN BELOW, SO THAT THE ACTUATOR IS ENERGIZED AND DE-ENERGIZED WHEN THE SPRAY WATER PUMP MOTOR IS ENERGIZED AND DE-ENERGIZED. THE SPRAY WATER PUMP SHOULD BE CONTROLLED BY A THERMOSTAT SET AT 5° BELOW THE FAN OR FAN DAMPER SET POINT.

FOR DRY OPERATION, THE DRY OPERATION FAN CONTROL CONTACT CLOSING THE TIME DELAY RELAY (TR) COIL, CLOSING THE AUXILIARY TIME RELAY CONTACTS (AUX TRC) AND THEN OPENING THE POSITIVE CLOSURE DAMPERS. TWENTY SECONDS AFTER THE AUXILIARY TIME RELAY CONTACTS CLOSE, THE FAN MOTOR COIL IS ENERGIZED. THE TIME DELAY IS REQUIRED TO PREVENT THE FAN MOTOR FROM STARTING WITH THE POSITIVE CLOSURE DAMPER HOOD CLOSED.



NOTES:

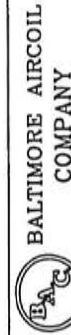
1. THE DAMPER MOTOR ACTUATORS ARE SPRING RETURN TYPE, BARBER-COLEMAN (Model MA-418).
2. THE DAMPER MOTOR ACTUATOR(S) AND LINKAGE(S) ARE FACTORY-MOUNTED ON THE HOOD(S).
3. ALL WIRING TO BE FURNISHED BY FIRMS OTHER THAN BALTIMORE AIRCOIL COMPANY AND MUST COMPLY WITH ALL APPLICABLE CODES AND ORDINANCES.
4. POWER SUPPLY FOR DAMPER ACTUATORS TO BE 120V-60Hz. PROVIDE DISCONNECT MEANS AND OVER-LOAD PROTECTION AS REQUIRED.
5. THE AUXILIARY CONTACT ON THE SPRAY WATER PUMP IS THE PRIMARY CONTROL DURING WET OPERATION.

THE FOLLOWING ITEMS ARE FURNISHED BY FIRMS OTHER THAN BALTIMORE AIRCOIL COMPANY:

- TR: 20 SECOND TIME DELAY RELAY N/O TIMED ON FAN MOTOR STARTER COIL
- F: TIME DELAY CONTACT
- AUX TRC: AUXILIARY SET OF CONTACTS ON COIL OF TIME DELAY RELAY
- AUX PSC 1, 2: AUXILIARY SET OF CONTACTS ON SPRAY WATER PUMP STARTER
- FCC 1, 2: DRY OPERATION FAN CONTROL CONTACT
- WD: WET/DRY OPERATION SELECTOR SWITCH

B.A.C.
ORDER NO: U065958201

DATE: 07/26/06



BALTIMORE AIRCOIL
COMPANY

POSITIVE CLOSURE DAMPER
CONTROL WIRING DIAGRAM

DRAWING NUMBER:

BAC-9803 B

A



WASHINGTON TWP. CONSTRUCTION OFFICE

PLAN REVIEW # 06-2298 DATE REC. _____

BUILDING _____ DATE: _____

ELECTRIC _____ DATE: 11-2-06

PLUMBING _____ DATE: _____

FIRE _____ DATE: _____

ELEVATOR _____ DATE: _____

CONST. OFF. _____ DATE: _____

PLAN RELEASED CITE: _____ SUBJECT TO FIELD INSPECTION

From: Origin ID: WWDA (856)802-1677
 William T Jackson
 NW Sign Industries, Inc
 360 Crider Avenue

Moorestown, NJ 08057



CLS128767/2/024

SHIP TO: 856 589-0520

BILL SENDER

Janet - Building Dept.
 Washington Twp
 523 EGG HARBOR RD

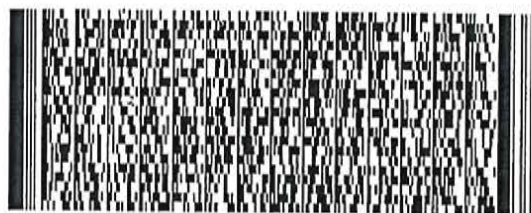
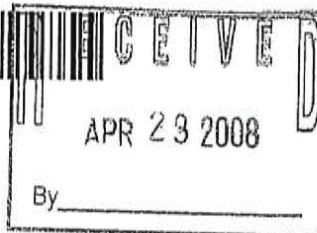
SEWELL, NJ 080802335

Ship Date: 21APR08
 ActWgt: 1 LB
 System#: 1519811/INET8010
 Account#: S *****

Delivery Address Bar Code



Ref # sun - turnersville
 Invoice #
 PO #
 Dept #

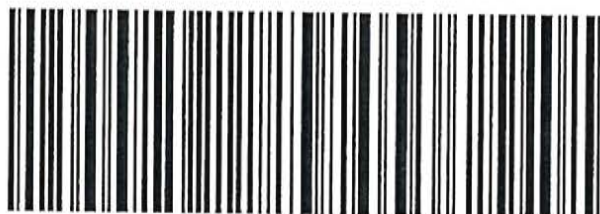


TRK# 7904 9679 7864
 0201

TUE - 22APR A3
 STANDARD OVERNIGHT

17 DYLA

08080
 NJ-US
 PHL



After printing this label:

1. Use the 'Print' button on this page to print the label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

Warning: Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in billing charges, along with the cancellation of your FedEx account number.

Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com. FedEx will not be responsible for claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequent special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value e.g. jewelry, precious metals, negotiable instruments and other items listed in our Service Guide. Written claims must be filed within strict time limits, see current FedEx Service Guide.

Township of Washington

523 Egg Harbor Road

Sewell, NJ 08080

(856)256-0234 FAX (856)218-1473

Permit No. **20080556**

Parcel(Block/Lot)**115.04/12.**

Date **6/2/08**

Construction Permit

Work Site Location 4651 ROUTE 42 Contractor..... NW SIGN INDUSTRIES
Owner in Fee..... SUN NATIONAL BANK ACCTS PAYABLE Address..... 360 CRIDER AVE
Address..... 226 W LANDIS AVE MOORESTOWN, NJ 08057
VINELAND, NJ, 08360 Phone..... (856)802-1677
Phone..... _____ Lic No..... WT1129071677-11/29/08
Fed Emp No. _____

Permission is hereby granted to do the following work:

- | | | |
|--|---|--|
| ☒ BUILDING | ☐ PLUMBING | ☐ LEAD HAZARD ABATEMENT |
| ☒ ELECTRIC | ☐ FIRE | ☐ DEMOLITION |
| ☐ ELEVATOR | ☐ ASBESTOS ABATEMENT | ☐ OTHER |
| | ☐ Mechanical | |

Description of Work:

REMOVE & REPLACE 2 ILLUMINATED PYLON
SIGNS - 10' X 5'1" X 15 EACH

*Note: If construction does not commence within one (1) year
of the date of issuance or if construction ceases for a period
of six(6) months, this permit is Void.*

Estimated Cost of Work: \$10,500

PAYMENTS (Office Use Only)

Building	\$200
Electrical	45
Plumbing	0
Fire Protection	0
Elevator Devices.....	0
Other	0
State Training Fee	14
Certificate of Occupancy	0
Other	0
Total	\$259

Check# Cash 87296
Paid

Collected By MIL

Construction-Official

Date

*Failure to obtain all required inspections may result in administrative action
Final inspections are required before final payment is to be made to contractor
An approved set of plans must be kept at the worksite at all times*

Municipality Copy/Applicant Copy



BUILDING SUBCODE TECHNICAL SECTION



RECEIVED
APR 23 2008
M. M. M.

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

Block 115.04 Lot 12 Qualification Code _____

Work Site Location 41051 RT. 42

TOREADSVILLE, NJ

Owner in Fee: 5120 NATIONAL BANK

Tel. () _____ e-mail _____

Address 2210 LANDIS AVE. VIRLAND NJ

Contractor: NW SIGN INDUSTRIES Tel. (856) 802-1677

Address _____ e-mail _____

Contractor License No. or Builder Registration No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____

Federal Emp. ID No. _____ FAX: (856) 802-0412

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)			
			Type:	Failure	Failure	Approval	Initial
☒ All	4/24/08	RA	Footings				
☐ No Plans Required			Footings Bonding				
☐ Foundation			Foundation				
☐ Frame			Slab				
☐ Other			Frame				
			Truss Sys/Bracing				
			Barrier-Free				
			Insulation				
			Finishes -Base Layer				
			Finishes -Final				
			Energy				
			Mechanical				
			TCO				
			Other				
			Final				
			Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed	1. New Bldg. \$
No. of Stories			2. Rehabilitation \$
Height of Structure			3. Total (1+2) \$10,000.00
Area — Largest Floor			
New Bldg. Area/All Floors			
Volume of New Structure			
Total Land Area Disturbed			

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	FEE (Office Use Only)
INSTALL EXTERIOR SIGNS	
2 = 10' X 5' 1" X 15' Pylon Signs	

Date Received 4/24/08
Control # _____
Date Issued 08.0556
Permit # _____

TYPE OF WORK:	FEE (Office Use Only)
☐ New Building	
☐ Addition	
☐ Rehabilitation	
☐ Roofing	
☐ Siding	
☐ Fence _____ Height (exceeds 6')	
☒ Sign <u>100</u> Sq. Ft.	
☐ Pool	
☐ Retaining Wall _____ Sq. Ft.	
☐ Asbestos Abatement Subchapter 8	
☐ Lead Haz. Abatement NJAC 5:17	
☐ Radon Remediation	
☐ Other _____	
☐ Demolition	

Administrative Surcharge \$	
Minimum Fee \$	
State Permit Surcharge Fee \$	
TOTAL FEE \$	<u>2,000</u>

APR 23 2008

By DA MEX



**ELECTRICAL
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 115.04 Lot 12

Work Site Location 41601 RT. 42

TURNERSVILLE NJ

Owner in Fee/Occupant SUN NATIONAL BANK

Address 8210 LANDIS AVE.

VINELAND NJ

Tele ()

Contractor Zidell Electric, LLC.

Address 506 Wesley Ave

Highway 205 08071

Tele (856) 588 6401 Fax (856) 588 6501

Lic. No. 1235678

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work \$ 500

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plans Required

Joint Plan Review Required:

☐ Building ☐ Plumbing

☐ Fire ☐ Elevator

☒ Elec. Plans Approved

Date: 4-24-08

Approved by:

D. TECHNICAL SITE DATA



Date Received 6/2/08
Date Issued 08-0556
Control #
Permit #

QTY. SIZE

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors—Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UVW 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 1/4 HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

FEE (Office Use Only)

\$

\$

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Administrative Surcharge \$ 45
Minimum Fee \$
DCA Training Fee \$
TOTAL FEE \$ 45

WELINK @
5160 ONLY
put

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

Township of Washington

523 Egg Harbor Road

Sewell, NJ 08080

8562560234 FAX 8562181473

Permit No., If Any

Control No.

Log No.

510

NOTICE OF VIOLATION AND ORDER TO TERMINATE
(WORK WITHOUT PERMITS)

Identification

Work Site

Block/Lot

115.04/12.

Unit

SUN NATIONAL BANK ACCTS PAYABLE

226 W LANDIS AVE

VINELAND, NJ 08360

Contractor RON BRODIE

NW SIGN INDUSTRIES

360 CRIDER AVE

MOORESTOWN, NJ 08057

Action

Date of Notice 4/15/2008 Compliance Due Date 4/21/2008 Date of Inspection 4/11/2008

TAKE NOTICE that you have been found to be in violation of the State Uniform Construction Code Act and Regulations promulgated thereunder in that

WORK WAS PERFORMED WITHOUT OBTAINING THE REQUIRED CONSTRUCTION PERMITS, IN VIOLATION OF N.J.A.C.5:23-2.14(a) No construction permits for sign

You are hereby ordered to terminate the said violations on or before 4/21/2008
No Certificate of Occupancy or Approval will be issued unless the said violations are corrected.

Failure to comply with this Order will subject you to a penalty of \$ 500 per week

If you wish to contest the validity of the above action, you may request a hearing before the Construction

Board of Appeals of the County of **GLOUCESTER**

within 15 days of the receipt of these Orders. The Application to the Construction Board of Appeals may be used for this purpose.

Your application for appeal must be in writing, setting forth your address and name, the address of the building or site in question, the permit number, the specific sections of the Regulations in question, and the extent and nature of your reliance on the Regulations and, if necessary, a brief statement setting forth your position and the nature of the relief sought by you. You may also append any documents that you consider useful.

The fee for an appeal is \$ 50.00 to be forwarded with your application to the Construction Board of Appeals

office at: **Rt 45 & Budd Blvd, Woodbury, NJ 08096**

If you have any questions concerning this matter, please call then construction office, Township of Washington

Subcode Official

Date

Tom Krwawecz

Construction Official

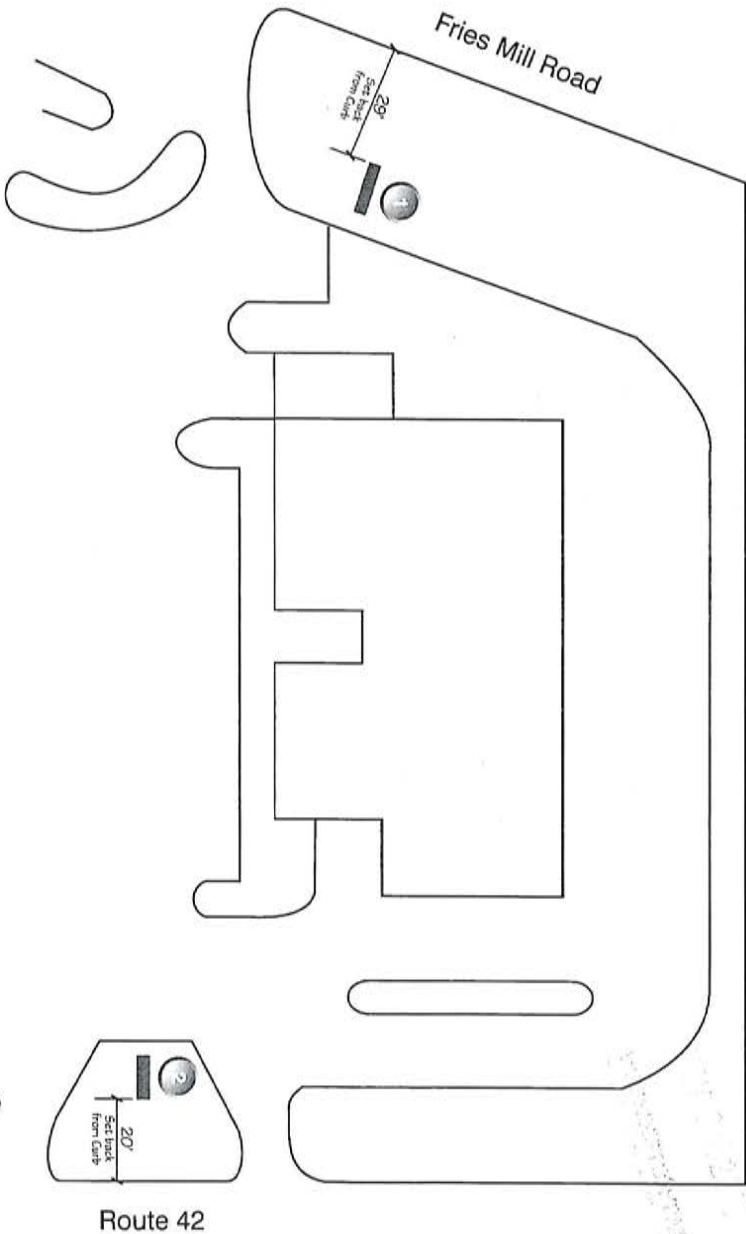
Date

SIGN SCHEDULE

Proposed Sign Inventory

Site #	#	Sign Code	Description
Turnersville	1	PS0	D/F Illum. Pylon
Turnersville	2	PS0	D/F Illum. Pylon

SITE PLAN



07-1039

REV 1

San National Bank

4651 Route 42
Turnersville, NJ 08012

Turnersville

DATE 9/24/07

DESIGNER BKW

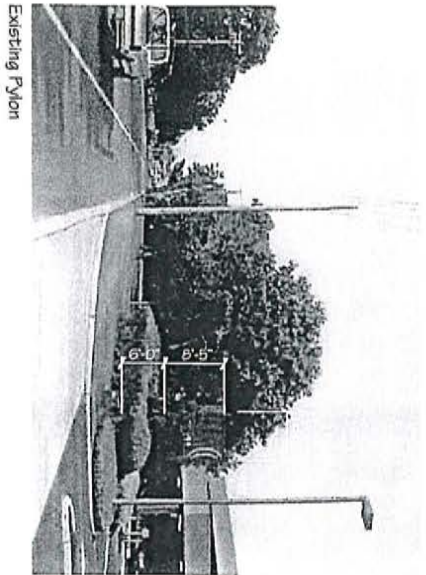
SCALE 1/8" = 1'-0"

DOH 3

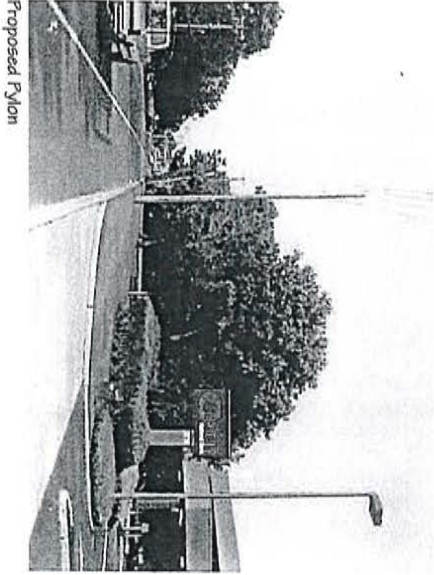
NW SIGN INDUSTRIES
Corporate Office

360 CRIDER AVENUE
MOORESTOWN, NJ 08057
(856) 802-1877 • Fax: (856) 802-0412





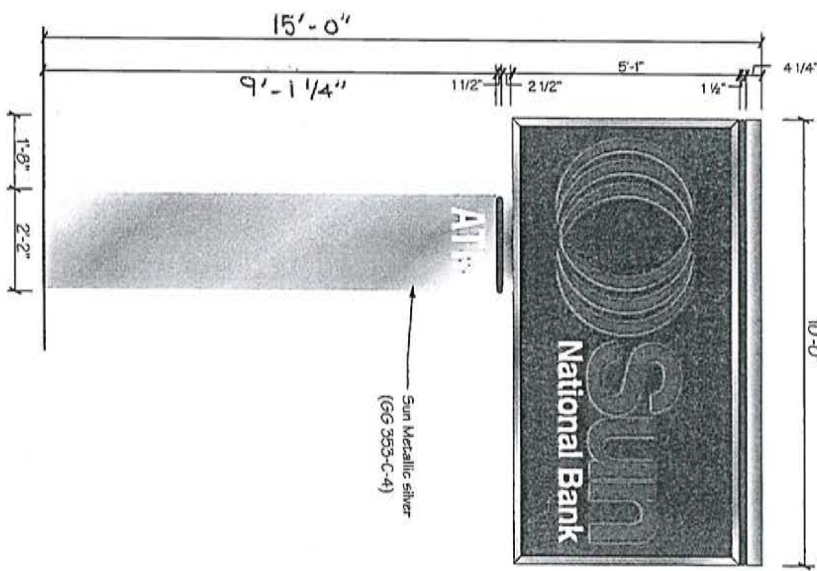
Existing Pylon



Proposed Pylon



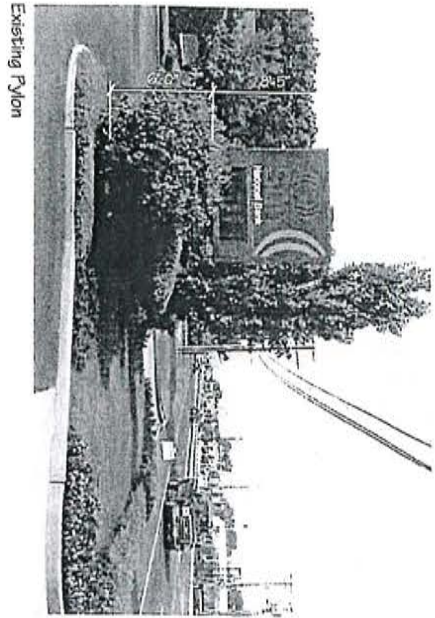
PLAN VIEW
SCALE: 3/8" = 1' 0"



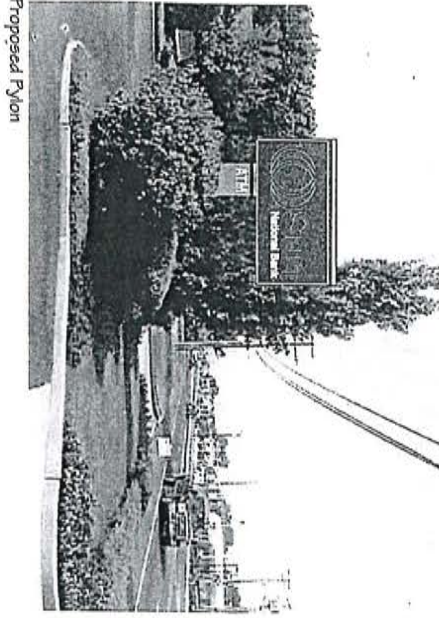
SIDE VIEW
SCALE: 3/8" = 1' 0"

D/F ILLUMINATED PYLON - PSQ
SCALE: 3/8" = 1' 0"

NOTES:
Clear acrylic face w/2nd surface Sun Blue vinyl (3630-346) symbol & copy removed. 2nd surface white offliner over the blue vinyl symbol and "Sun" to be 3/4" clear place vinyl on face (3630-333) "National Bank" to be 3/4" clear place white vinyl on face. Flame polish returns on all copy.



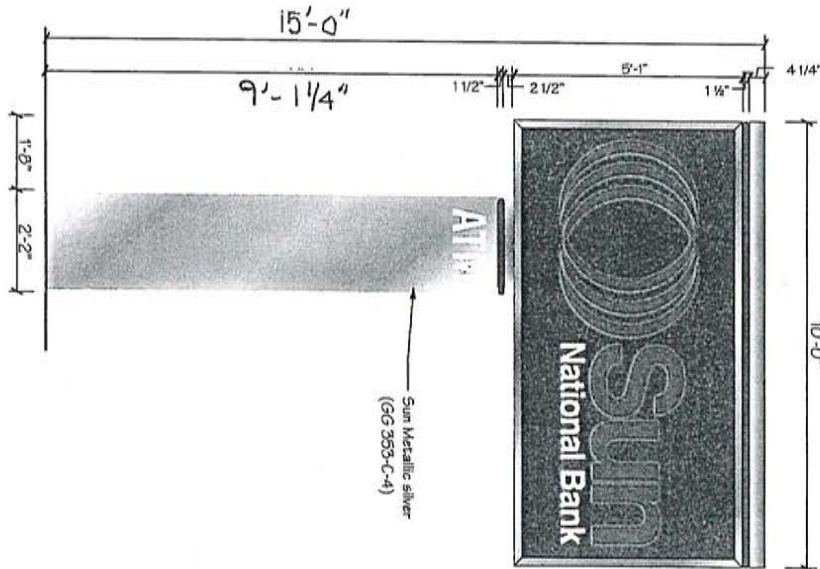
Existing Pylon



Proposed Pylon



PLAN VIEW
SCALE: 3/8" = 1' 0"



2 D/F ILLUMINATED PYLON - P50
SCALE: 3/8" = 1' 0"

NOTES:
Clear acrylic face w/ dual surface Sun Blue vinyl (26300-356) symbol & copy removes. The surface white affixer over the blue vinyl symbol and "Sun" to be 3/4" clear plex w/ dual vinyl on face (26300-353) "National Bank" to be 3/4" clear plex w/ white vinyl on face. Flame polish returns on all copy.



SIDE VIEW
SCALE: 3/8" = 1' 0"

BOOKING CALLED BY NEW INDUSTRIES, INC. IT IS REQUESTED THAT THE EXCLUSIVE USE OF THE COMPANY AND FOR THE
A. IT SHALL NOT BE PERMITTED TO ANY OTHER SIGN MANUFACTURER OR USED FOR ANY OTHER PROJECT WITHOUT THE WRITTEN

SIGN SCHEDULE

Site #	Sign Code	Description
Turnersville 1	PSO	D/F Illum. Pylon
Turnersville 2	PSO	D/F Illum. Pylon

Proposed Sign Inventory

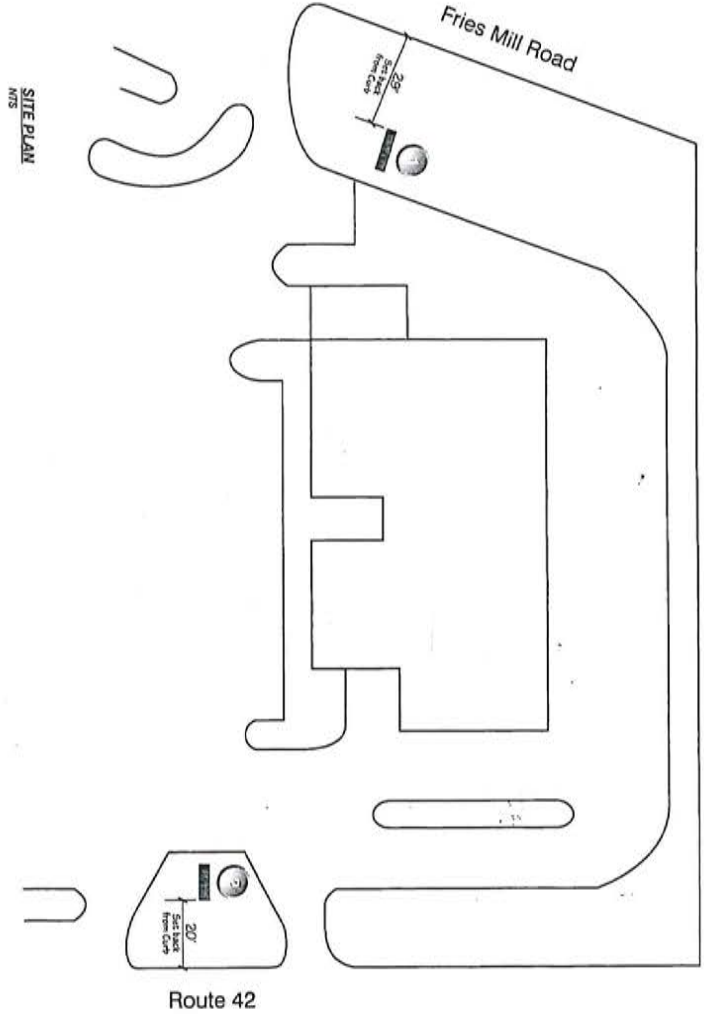
FILE COPY

WASHINGTON TWP. CONSTRUCTION OFFICE
PLAN REVIEW # 08-055 DATE REC.
REVIEWING AM DATE 4/14/08
EX. NO. 2 DATE 4/2/08
P. NO. 2 DATE 4/2/08
F. NO. 2 DATE 4/2/08
E. NO. 2 DATE 4/2/08
C.O. NO. 2 DATE 4/2/08
1. REVISIONS: SUBMIT TO FIELD INSPECTOR

REVISION NOTES

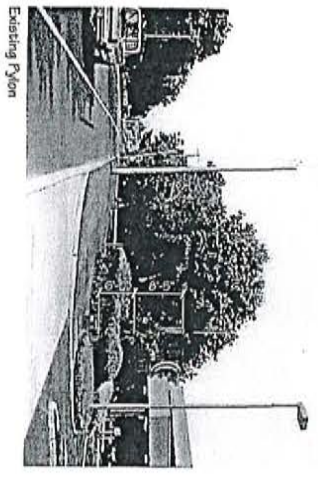
1. Added Foundation & Lighting Detail

SITE PLAN

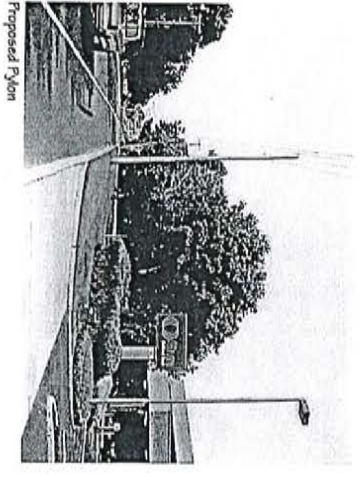


RECEIVED
APR 23 2008
Signs Med

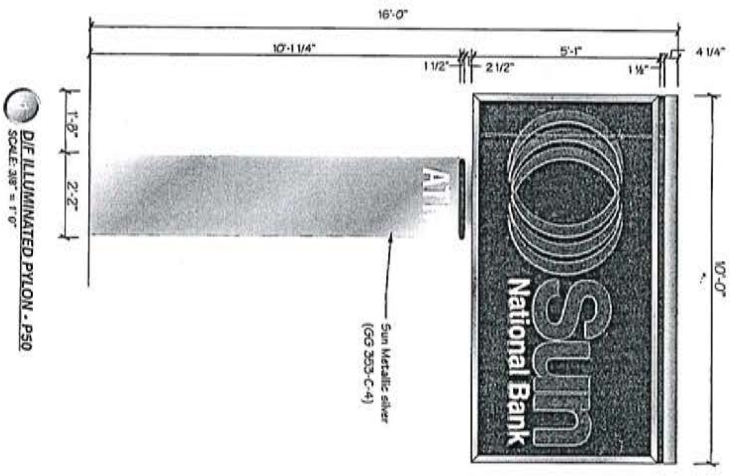
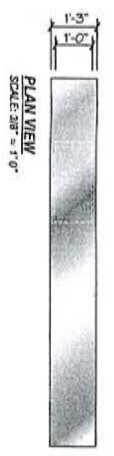
HW SIGN INDUSTRIES CORPORATE OFFICE 380 CRIDER AVENUE MOORESTOWN NJ 08057 - FLORIDA 2118 SAND LAKE ROAD ORLANDO, FL 32809 - TEXAS - SERVICE CENTER 440 SOUTH BELTLINE ROAD SUITE 442 IRVING, TX 75060 - NORTH CAROLINA 129 CASCADE DRIVE



Existing Pylon



Proposed Pylon



DIE ILLUMINATED PYLON - PSO

NOTES:
 Clear acrylic face with surface Sun Blue vinyl (D800-38) applied & copy removed. Side surface white acrylic over the blue vinyl applied and "Sun" to be 3/4" clear plexiglass and on face (D800-30) "National Bank" to be 3/4" clear plexiglass with vinyl on face. Please provide return on all copy.

HW SIGN INDUSTRIES CORPORATE OFFICE 380 CRIDER AVENUE MOORESTOWN NJ 08057 - FLORIDA 2118 SAND LAKE ROAD ORLANDO, FL 32809 - TEXAS - SERVICE CENTER 440 SOUTH BELTLINE ROAD SUITE 442 IRVING, TX 75060 - NORTH CAROLINA 129 CASCADE DRIVE

07-1009-1

2

Customer: Sun National Bank

Address: 4851 Route 42, Turnersville, NJ 08012

Turnersville

HW SIGN INDUSTRIES, INC. 2007

THIS IS A PRELIMINARY DESIGN. ALL DIMENSIONS ARE APPROXIMATE. THE CLIENT SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS. THE CLIENT SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS. THE CLIENT SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS.





360 Crider Avenue
 Moorestown, NJ 08057
 Phone: 856-802-1677
 Fax: 856-802-0412

Letter Of Transmittal

Date:	05/27/08	Job No.:	0
Site	Sun National Bank		
Site			
Address	4651 Rt. 42		
	Turnersville, NJ		
Block			
Lot			

Washington Township
 523 Egg Harbor Rd.
 Sewell, NJ 08080
 Phone: 856 589-0520
 Attn: Building Department

Attached Via: FedEx

Copies	Dwg No.	Description
1		Permit / Fine Fee

MESSAGE:

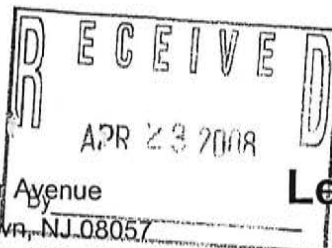
Thank you for your assistance in facilitating this process.

Thank you.
 Sincerely,

Bill Jackson
 Permit Coordinator
wjackson@nwsignindustries.com



360 Crider Avenue
 Moorestown, NJ 08057
 Phone: 856-802-1677
 Fax: 856-802-0412



Letter Of Transmittal

Date:	04/21/08	Job No.:	0
Site	Sun National Bank		
Site			
Address	4651 Rt. 42		
	Turnersville, NJ		
Block			
Lot			

Washington Township
 523 Egg Harbor Rd.
 Sewell, NJ 08080
 Phone: 856 589-0520
 Attn: Janet Building Dept.

Attached Via: FedEx

Copies	Dwg No.	Description
2	07-1039-1	Sealed Dwgs Drawings
1		Building Permit Application
1		Electrical Permit Application

MESSAGE:

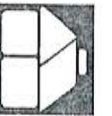
Thank you for your assistance in facilitating this process.

Thank you.
 Sincerely,

Bill Jackson
 Permit Coordinator
wjackson@nwsignindustries.com



NOV 20 2007
BUILDING 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 11504 Lot 12 Qualification Code _____
Work Site Location 4651 Rt 42

Owner in Fee Sum Nat'l Bank
Address Landers Ave
Vineland NJ

Tel. () HHH Contracting Corp
Contractor 337 Elk Rd
Philaesville NJ

Tel. (556) 304-0700 FAX (556) 581-6636
Contractor License No. or Builder Registration No. _____
Federal Emp. No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)			
			Type:	Failure	Failure	Approval	Initial
☐ No Plans Required			Footing				
☒ All	<u>12-30-07</u>	<u>TR</u>	Footing Bonding				
☐ Footing			Foundation				
☐ Foundation			Slab				
☐ Frame			Frame				
☐ Other			Truss Sys./Bracing				
Joint Plan Review Required:			Barrier-Free				
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Insulation				
SUBCODE APPROVAL			Finishes - Base Layer				
☐ CO ☐ CCO ☒ CA			Finishes - Final				
Date: <u>2-19-08</u>			Energy				
Approved by: <u>TR</u>			Mechanical				
			TCO				
			Other				
			Final				
			Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed	1. New Bldg. \$ <u>50,000</u>
No. of Stories			2. Rehabilitation \$ <u>34</u>
Height of Structure			3. Total (1+2) \$ <u>84</u>
Area — Largest Floor			
New Bldg. Area/All Floors			
Volume of New Structure			
Total Land Area Disturbed			

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 [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Becker Renovation.
New carpet.
Replace ceiling tiles
New walls
Sum National Bank

TYPE OF WORK:

☐ New Building
☒ Addition
☐ Rehabilitation
☐ Roofing
☐ Siding
☐ Fence
☐ Sign
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☐ Other
☐ Demolition

FEE (Office Use Only)

Administrative Surcharge \$ _____
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ 1,200-

Date Received 12/4/07
Control # _____
Date Issued 07-2108
Permit # _____



ELECTRICAL SUBCODE
TECHNICAL SECTION



NOV 20 2007

Date Received
Control #

12/4/07
07-2108

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

Block 11504 Lot 12 Qualification Code 4651 R-42

Owner in Fee Sec North Bank
Address Lehigh Ave
Unleaded NJ

Contractor NY Bellco Electric, Inc
Address Box 302
Philmont NJ 0807

Tel 656 881-8221 FAX 801-8221
Contractor License No. 4621

Federal Emp. No. -

B. ELECTRICAL CHARACTERISTICS

Use Group Present - Proposed -

☐ Pole/Pad # - ☐ Temporary ☐ Other -

Building Occupied as - Utility Co. -

Est. Cost of Elec. Work \$ 700.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial INSPECTIONS Dates (Month/Day)

☐ No Plans Required Type: Rough Failure Failure Approval 12-10-07

Joint Plan Review Required: Barrier-Free

☐ Building ☐ Plumbing Trench

☐ Fire ☐ Elevator Temp. Serv.

☒ Elec. Plans Approved Constr. Serv.

Date: 12-3-07 TCO

Approved by [Signature] Other

Service

Final

Barrier-Free

Temp. Cut-in-Card Date Issued 2-14-08

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date: 2-14-08

Approved by: [Signature] 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.

[Signature]
Applicant's Signature/Contractor's Seal and Signature

Licensed Elec. Contractor ☐ Certified Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY. SIZE ITEMS

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors—Fract. HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

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 1/4+ HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

FEE (Office Use Only)

\$ 36-

Administrative Surcharge \$

Minimum Fee \$

State Permit Surcharge Fee \$

TOTAL FEE \$ 45-

Township of Washington

Municipal Building

Turnersville, NJ 08012

(856)256-0234 FAX (856)218-1473

Permit No. **20072108**

Parcel(Block/Lot)**115.04/12.**

Date 12/4/07

Construction Permit

Work Site Location 4651 ROUTE 42
Owner in Fee..... SUN NATIONAL BANK
Address..... 226 LANDIS AVE
VINELAND, NJ, 08360
Phone..... (000)000-0000

Contractor..... HHM CONTRACTING CORP
Address..... 337 ELK ROAD
MONROEVILLE, NJ 08343
Phone..... (856)881-6446
Lic No..... WT1015076446-10/15/08, 13VH00795400- /
Fed Emp No.

Permission is hereby granted to do the following work:

- | | | |
|--|---|--|
| ☒ BUILDING | ☐ PLUMBING | ☐ LEAD HAZARD ABATEMENT |
| ☒ ELECTRIC | ☐ FIRE | ☐ DEMOLITION |
| ☐ ELEVATOR | ☐ ASBESTOS ABATEMENT | ☐ OTHER |
| | | ☐ Mechanical |

Description of Work:

RENOVATIONS TO EXISTING BANK

Note: If construction does not commence within one (1) year of the date of issuance or if construction ceases for a period of six(6) months, this permit is Void.

Estimated Cost of Work: \$50,700

[Signature] 12.4.07
Construction Official Date

*Failure to obtain all required inspections may result in administrative action
Final inspections are required before final payment is to be made to contractor
An approved set of plans must be kept at the worksite at all times*

Municipality Copy/Applicant Copy

U.C.C. F190 (Rev. 3/96)

PAYMENTS (Office Use Only)

Building	<u>\$1200</u>
Electrical	<u>45</u>
Plumbing	<u>0</u>
Fire Protection	<u>0</u>
Elevator Devices.....	<u>0</u>
Other	<u>0</u>
State Training Fee	<u>68</u>
Certificate of Occupancy	<u>0</u>
Other	<u>0</u>
Total	<u>\$1313</u>

Check#/Cash.....

Paid

Collected By MA

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Code Regulations (NJAC 5:2 2.18). This department will carry out such periodic inspections during the progress of work as are necessary insure that work installed conforms to the approved plans and the requirements of the Uniform Constructic Code.

The owner or other responsible person in charge of the work must notify this office when work is ready for an required inspections. Requests for inspections must be made when work is ready for inspection. Inspection will be performed within three business days from the time the request is received by this office. The wor requested to be inspected must not proceed in a manner which would hamper or preclude the inspection unt the inspection has been made and approval given.

1. The bottom of footing trenches before placement of concrete.
2. Foundation and all walls which contain rebar prior to concrete pour.
3. Foundations and all walls up to grade level prior to backfill. Submit foundation survey at this time.
4. All slabs prior to concrete, except driveways and walks.
5. All structural framing and connections prior to covering with finish or infill material; plumbing underground service, rough piping, water service, sewer connections, and storm drains; electrical rough wiring, panels and service installation; all insulation installations.
6. Installation of all finished materials; sealing of exterior joints; plumbing piping; trim and fixtures; electrical wiring, devices and fixtures; mechanical Systems equipment.

THE APPLICANT BY ACCEPTING THE PERMIT WILL BE DEEMED TO HAVE CONSENTED TO THESE REQUIREMENTS. A COMPLETE COPY OF THE APPROVED PLANS, ALL TRUSS DRAWINGS, AND INSTALLATION MANUALS MUST BE KEPT ON THE JOB SITE. ANY VIOLATIONS OF THE APPROVED PLANS AND/OR PERMIT WILL BE NOTED AND THE HOLDER OF THE PERMIT NOTIFIED OF DISCREPANCIES.

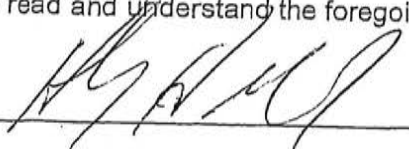
REQUIREMENTS NEEDED PRIOR TO A CERTIFICATE OF OCCUPANCY BEING ISSUED

1. All final inspections, building/electric/plumbing/fire/elevator, including minor work (fences, signs, roofing, siding, etc.)
2. Final water test - stamped by Board of Health
3. Warranty Plan - State or private
4. Final survey
5. Request of Certificate of Occupancy Form
6. Final septic approval - Board of Health
7. Final Soil approval, if applicable
8. Final well record, if applicable
9. Water meter approval, if applicable
10. All approved construction debris receipts
11. Addresses must be conspicuously displayed for final inspections
12. Board of Health approval - Food establishments only
13. Final landscaping engineering approval

THIS OFFICE REQUIRES FIVE (5) WORKING DAYS TO ISSUE A CERTIFICATE OF OCCUPANCY FROM THE DATE OF FINAL INSPECTION

I have read and understand the foregoing statements and agree to abide by said stated rules/regulations

SIGN



DATE

11/20/07



TOWNSHIP OF WASHINGTON
PO BOX 1106 -523 EGG HARBOR RD
TURNERSVILLE, NJ 08012
856 - 589-0520

7-2604
04-1162
Control Number: 17935
Application Date: 06/30/2004

CONSTRUCTION PERMIT IDENTIFICATION

OWNER/PROPERTY DETAILS

Block : 115.04	Lot : 12	Qual :		
Work site Location:	4651 ROUTE 42 WASHINGTON			Contractor: DJK ROOFING 08/04
Owner In Fee:	SUN NATIONAL BANK			Address: 15 W. WALNUT AVENUE
Address:	4651 ROUTE 42			WESTMONT NJ 08108
	TURNERSVILLE NJ			Telephone: (856) - 869-4300
Telephone:				Lic. No. / Bldrs. Reg. No.:
Use Group(s):	U			Federal Emp. No.:

is hereby granted permission to perform the following work :

- | | | |
|--|--|-------------------------------------|
| ☒ BUILDING | ☐ PLUMBING | ☐ DEMOLITION |
| ☐ ELECTRICAL | ☐ FIRE PROTECTION | ☐ OTHER |
| ☐ ELEVATOR DEVICES | ☐ MECHANICAL | |
| ☐ ASBESTOS ABATEMENT | ☐ LEAD HAZARD ABATEMENT | |

(Subchapter 8 only)

DESCRIPTION OF WORK:

Roofing RUBBER

ESTIMATED COST OF WORK:

Cost of Construction: 0.00
Cost of Alteration: 15,000.00
Cost of Demolition: 0.00

Total Cost: \$15,000.00

PAYMENTS (Office Use Only)

Building	\$282.00
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	\$20.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	\$302.00
All Fees Waived :	No

Amount to be Paid: \$302.00

If construction does not commence within one year of date of issuance,
or if construction ceases for a period of six months, this permit is void.

Louis J. Palena
LOUIS PALENA

7/13/04
Date

Construction Official

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times

Note:

Ch 1107
MJ



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

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

Block _____ Lot _____
Work Site Location _____
Owner in Fee _____
Address _____
Tele. _____
Contractor _____
Address _____
Tele. _____
Lic. No. or Bids. Reg. No. _____ Fax (_____) _____
Federal Emp. No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
			Type:	Failure Failure Approval Initial
☐ No Plans Required	7/1/04	TH	Footings	
☐ All			Foundation	
☐ Footing			Slab	
☐ Foundation			Frame	
☐ Other			Barrier-Free	
Joint Plan Review Required:				
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Insulation	
SUBCODE APPROVAL				
☐ CO ☐ CCO ☐ CA			Finishes	
Date: _____			Energy	
Approved by: _____			Mechanical	
			TCO	
			Other	
			Final	
			Barrier-Free	

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Alteration \$ 15,000.00
3. Total (1+2) \$ _____

TYPE OF WORK:

☐ New Building
☐ Addition
☐ Alteration
☒ Roofing
☐ Siding
☐ Fence _____ Height (exceeds 6')
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☐ Other _____
☐ Demolition

FEE (Office Use Only)

Administrative Surcharge \$ _____
Minimum Fee \$ _____
DCA Training Fee \$ _____
TOTAL FEE \$ 202

U.C.C. F110
(rev. 3/99)

1* White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy



TOWNSHIP OF WASHINGTON
PO BOX 1106 -523 EGG HARBOR RD
TURNERSVILLE NJ 08012
856-589-0520

CERTIFICATE

Date Issued: 01/05/2004

Control #: 16646

Permit # 20031835

IDENTIFICATION

Block: 115.04 Lot: 12 Qual: _____

Home Warranty No: _____

Work Site: 4651 ROUTE 42

Type of Warranty Plan: _____

[] State [] Private

WASHINGTON

Use Group: _____

B

Owner in Fee: SUN NATIONAL BANK

Maximum Live Load: _____

Address: 4651 ROUTE 42

Construction Classification: _____

TURNERSVILLE NJ

Maximum Occupancy Load: _____

Telephone: _____

BARTON CARPETS

Certificate Exp Date: _____

Agent/Contractor: _____

Address: 47 S BROWNING ROAD

Description of Work/Use: _____

FIT UP RUG

BELLMAWR NJ 08031

Telephone: _____

Lic. No./ Bldgs. Reg.No.: _____ Federal Emp. No.: _____

Social Security No.: _____

[] CERTIFICATE OF OCCUPANCY

[] CERTIFICATE OF CLEARANCE-LEAD ABATEMENT 5:17

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17 to the following extent:

[X] CERTIFICATE OF APPROVAL

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

[] Total removal of lead-based paint hazards in scope of work
[] Partial or limited time period (____ years); see file

[] CERTIFICATE OF CONTINUED OCCUPANCY

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

[] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

[] CERTIFICATE OF COMPLIANCE

If this is a temporary Certificate of Occupancy or Compliance the following conditions must be met no later than _____ or the owner will be subject to fine or order to vacate.

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____

John J. Palanca

LOUIS PALENA Construction Official

U.C.C 360 (rev. 3/96)

1 - APPLICANT 2 - OFFICE 3 - TAX ASSESSOR

Fees \$0.00

Paid [X] Check No _____

Collected by SM _____



BUILDING 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 115.04 Lot 12
Work Site Location 4651 Black Horse Pike
Owner in Fee 5 Cur Banks
Address _____

Tele. _____
Contractor BARTON CAPETS
Address 475 Browning Rd
Belmar NJ 08031
Tele. (856) 933-3500 Fax (856) 933-0484
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)			
			Type:	Failure	Failure	Approval	Initial
☒ No Plans Required	<u>12-12-03</u>	<u>TK</u>					
☐ All			Footings				
☐ Footing			Foundation				
☐ Foundation			Slab				
☐ Frame			Frame				
☐ Other			Barrier-Free				
Joint Plan Review Required:			Insulation				
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Finishes				
SUBCODE APPROVAL			Energy				
☐ CO ☐ CCO ☒ CA			Mechanical				
Date: <u>12-22-03</u>			TCO				
Approved by: <u>TK</u>			Other				
			Final				
			Barrier-Free				

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:

1. New Bldg. \$ 2400
2. Alteration \$ _____
3. Total (1+2) \$ _____



Date Received 12-18-03
Date Issued _____
Control # 03-1825
Permit # _____

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 [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Carpet -
but up -

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Alteration
- ☐ Roofing
- ☐ Siding
- ☐ Fence _____ Height (exceeds 6') _____
- ☐ Sign _____ Sq. Ft. _____
- ☐ Pool
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☒ Other Carpet & Siding
- ☐ Demolition

FEE (Office Use Only)

Administrative Surcharge \$ _____
Minimum Fee \$ 5
DCA Training Fee \$ 80
TOTAL FEE \$ _____



TOWNSHIP OF WASHINGTON
PO BOX 1106 -523 EGG HARBOR RD
TURNERSVILLE, NJ 08012
856 - 589-0520

12-18-03

03-1835

Control Number: 16646

Application Date: 12/16/03

CONSTRUCTION PERMIT

OWNER/PROPERTY DETAILS

Block : 115.04 Lot : 12 Qualifier :
Work site Location: 4651 ROUTE 42 WASHINGTON
Owner In Fee: SUN NATIONAL BANK
Address: 4651 ROUTE 42
TURNERSVILLE NJ
Telephone: 0 -
Use Group(s): B

Contractor: BARTON CARPETS
Address: 47 S BROWNING ROAD
BELLMAWR NJ 08031
Telephone: (856) - 933-3500
Lic. No. / Bldrs. Reg. No.:
Federal Emp. No.:

is hereby granted permission to perform the following work :

☒ BUILDING ☐ PLUMBING ☐ DEMOLITION
☐ ELECTRICAL ☐ FIRE PROTECTION ☐ OTHER
☐ ELEVATOR DEVICES ☐ MECHANICAL
☐ ASBESTOS ABATEMENT ☐ LEAD HAZARD ABATEMENT

(Subchapter 8 only)

DESCRIPTION OF WORK:

FIT UP RUG

ESTIMATED COST OF WORK:

Cost of Construction: \$0.00
Cost of Alteration: \$3,400.00
Cost of Demolition: \$0.00

Total Cost: \$3,400.00

PAYMENTS (Office Use Only)

Building	\$84.00
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	\$5.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	\$89.00
All Fees Waived :	No

Amount to be Paid: \$ 89.00

If construction does not commence within one year of date of issuance,
or if construction ceases for a period of six months, this permit is void.

LOUIS PALENA
Construction Official

12/18/03
Date

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times.

Note:



TOWNSHIP OF WASHINGTON
PO BOX 1106 -523 EGG HARBOR RD
TURNERSVILLE, NJ 08012
856 - 589-0520

Thursday
12/9

CCO Number: 20030028

CCO Date: 12/1/2003

Control Number: 16513

Application Date: 12/01/03

REQUEST FOR CERTIFICATE OF CONTINUED OCCUPANCY

OWNER/PROPERTY DETAILS

Block : 115.04 Lot : 12 Qualifier :
Work site Location: 4651 ROUTE 42 WASHINGTON Contractor:
Owner In Fee: SUN NATIONAL BANK Address:
Address: 226 LANDIS AVE
VINELAND NJ 08360 Telephone: 0 -
Telephone: Lic. No. / Bldrs. Reg. No.:
Use Group(s): B Federal Emp. No.:

is hereby granted permission to perform the following work :

☒ BUILDING ☒ PLUMBING ☐ DEMOLITION
☒ ELECTRICAL ☒ FIRE PROTECTION ☐ OTHER
☐ ELEVATOR DEVICES ☐ MECHANICAL
☐ ASBESTOS ABATEMENT ☐ LEAD HAZARD ABATEMENT

(Subchapter 8 only)

DESCRIPTION OF WORK:

CHANGE IN TENANT AND/OR OCCUPANCY

ESTIMATED COST OF WORK:

Cost of Construction: \$0.00
Cost of Alteration: \$0.00
Cost of Demolition: \$0.00
Total Cost: \$0.00

PAYMENTS (Office Use Only)

Building
Electrical
Plumbing
Fire Protection
Elevator Devices
Mechanical
VolFee (DCA)
AltFee (DCA)
Other Fees
CO Fee
CCO Fee
Minimum Fee
Total
All Fees Waived : Yes

Amount to be Paid:

LOUIS PALENA
Construction Official

Date

:: Failure to obtain all required inspections may result in administrative action.
:: Final inspections are required before final payment is to be made to contractor.
:: An approved set of plans must be kept at the worksite at all times.

Note: *NEW CARPET - NO PERMIT*

12-9-03 TK

PERMIT SUBMITTED 12-15-03

MOHAWK

INDUSTRIES, INC.

TO:

FAX: 856-933-0989

FROM: Quality Assurance

DATE: DECEMBER 12, 2003

STYLE: DIGITAL (4040)

Please be advised that this style meets or exceeds the requirements of flammability test method 16CFR-1630.4 (FF1-70) and ASTM D-2859 (Pill Test).

5081 Hwy. 114, Lyerly, GA 30730 888-387-9881

TOTAL P.01

WASHINGTON TOWNSHIP

CERTIFICATE APPLICATION FOR EXISTING STRUCTURE

Date Received _____
Control # _____

Date Issued _____
Fee \$ _____ Cash _____ Chk. _____

IDENTIFICATION

Block 115.04 Lot 12 Work Site Location 4651 Rt 42 Turnersville NJ
Owner In Fee SUN National Bank 08012
Address 226 Landis Avenue Vineland NJ 08360
Telephone # () _____ Trade Name SUN National Bank

USE GROUP CLASSIFICATION Current/Proposed

	C	P		C	P
A ASSEMBLY	☐	☐	I INSTITUTIONAL	☐	☐
B BUSINESS	☒	☒	M MERCANTILE	☐	☐
E EDUCATIONAL	☐	☐	R RESIDENTIAL	☐	☐
F FACTORY & INDUSTRIAL	☐	☐	S STORAGE	☐	☐
H HIGH HAZARDS	☐	☐	U UTILITY & MISC.	☐	☐

1. Floor Plans as presently in existing building.
2. A set of As-Built or amended drawings is required if the structure or building deviates from the existing.
3. Part Change of Use: If a portion of the structure is changed to a New Use Group and that portion is separate from the remainder of the structure with the required vertical and horizontal fire divisions rating, the New Use Group change shall conform to requirements of the New Use Group and the existing portion shall comply with exitway requirements of the regulations.
4. Change of Use: It shall be unlawful to make any change in the Use Group of any structure or building which would subject it to any provision of the regulations (Codes).
5. Certificate of Occupancy: Shall be issued provided such structure will meet the intent of the provisions of the regulations for the proposed New Use Group and such change does not result in any greater hazard to safety or welfare.

NO CHANGE

☒ CERTIFICATE OF OCCUPANCY
☒ CERTIFICATE OF CONTINUED USE

☐ CERTIFICATE OF APPROVAL
☐ TEMPORARY C.O.

SIGNATURE OF OWNER/AGENT

[Signature]
JOHN A. HALL
VICE PRESIDENT - ADMINISTRATIVE SERVICES



TOWNSHIP OF WASHINGTON
PO BOX 1106 -523 EGG HARBOR RD
TURNERSVILLE, NJ 08012
856 - 589-0520

*Tuesday
12/9*

CCO Number: 20030028

CCO Date: 12/1/2003

Control Number: 16513

Application Date: 12/01/03

REQUEST FOR CERTIFICATE OF CONTINUED OCCUPANCY

OWNER/PROPERTY DETAILS

Block : 115.04	Lot : 12	Qualifier :	
Work site Location:	4651 ROUTE 42 WASHINGTON	Contractor:	
Owner In Fee:	SUN NATIONAL BANK	Address:	
Address:	226 LANDIS AVE	Telephone:	() -
	VINELAND NJ 08360	Lic. No. / Bldrs. Reg. No.:	
Telephone:		Federal Emp. No.:	
Use Group(s):	B		

is hereby granted permission to perform the following work :

- | | | |
|--|---|-------------------------------------|
| ☒ BUILDING | ☒ PLUMBING | ☐ DEMOLITION |
| ☒ ELECTRICAL | ☒ FIRE PROTECTION | ☐ OTHER |
| ☐ ELEVATOR DEVICES | ☐ MECHANICAL | |
| ☐ ASBESTOS ABATEMENT | ☐ LEAD HAZARD ABATEMENT | |

(Subchapter 8 only)

DESCRIPTION OF WORK:

CHANGE IN TENANT AND/OR OCCUPANCY

ESTIMATED COST OF WORK:

Cost of Construction:	\$0.00
Cost of Alteration:	\$0.00
Cost of Demolition:	\$0.00
Total Cost:	\$0.00

*Failed
12-9-03
see Book
Jm*

PAYMENTS (Office Use Only)

Building	
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	
All Fees Waived :	Yes

Amount to be Paid:

LOUIS PALENA

Construction Official

Date

*12-15-03
Passed
Jm*

- :: Failure to obtain all required inspections may result in administrative action.
- :: Final inspections are required before final payment is to be made to contractor.
- :: An approved set of plans must be kept at the worksite at all times.

Note:

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Code Regulations (NJAC 5:23-2.18). This department will carry out such periodic inspections during the progress of work as are necessary to insure that work installed conforms to the approved plans and the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of the work must notify this office when work is ready for any required inspections. Requests for inspections must be made by 3PM the day before the inspection is desired. Inspections will be performed within three business days from the time the request is received by this office. The work requested to be inspected must not proceed in a manner which would hamper or preclude the inspection until the inspection has been made and approval given.

1. The bottom of footing trenches before placement of footings, except in the case of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back fill.
3. All structural framing and connections prior to covering with finish or infill material; plumbing underground service, rough piping, water service, sewer connections, and storm drains; electrical rough wiring, panels and service installation; all insulation installations.
4. Installation of all finished materials; sealing of exterior joints; plumbing piping; trim and fixtures; electrical wiring, devices and fixtures; mechanical Systems equipment.

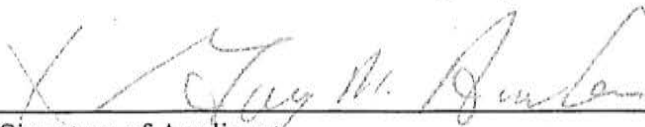
THE APPLICANT BY ACCEPTING THE PERMIT WILL BE DEEMED TO HAVE CONSENTED TO THESE REQUIREMENTS. A COMPLETE COPY OF THE APPROVED PLANS MUST BE KEPT ON THE JOB SITE. ANY VIOLATIONS OF THE APPROVED PLANS AND/OR PERMIT WILL BE NOTED AND THE HOLDER OF THE PERMIT NOTIFIED OF DISCREPANCIES.

REQUIREMENTS NEEDED PRIOR TO A CERTIFICATE OF OCCUPANCY BEING ISSUED

1. All final inspections, building/electric/plumbing/fire/elevator, including minor work (fences, signs, roofing, siding, etc.)
2. Final water test - stamped by GLO. County Board of Health
3. Warranty Plan - State or private
4. Final survey
5. Request of Certificate of Occupancy Form
6. Final septic approval - GLO. County Board of Health
7. Final GLO. County Soil approval, if applicable
8. Final well record, if applicable
9. Water meter approval by MMUA, if applicable
10. All approved construction debris receipts
11. Addresses must be conspicuously displayed for final inspections
12. GLO. County Board of Health approval - Food establishments only
13. Final landscaping/engineering approval

**THIS OFFICE REQUIRES FIVE (5) WORKING DAYS TO ISSUE
A CERTIFICATE OF OCCUPANCY FROM THE DATE OF FINAL INSPECTION.**

I have read and understand the foregoing statements and agree to abide by said stated rules/regulations


Signature of Applicant

12/15/03
Date