



PLUMBING SUBCODE TECHNICAL SECTION



Date Received 2/3/2020
Control # C-0097
Date Issued 2/11/2020
Permit # 20-0121

C. CERTIFICATION IN LIEU OF OATH

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

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
RTU (x5)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
_____	Water Closet	_____
_____	Urinal/Bidet	_____
_____	Bath Tub	_____
_____	Lavatory	_____
_____	Shower	_____
_____	Floor Drain	_____
_____	Sink	_____
_____	Dishwasher	_____
_____	Drinking Fountain	_____
_____	Washing Machine	_____
_____	Hose Bibb	_____
_____	Water Heater	_____
_____	Fuel Oil Piping	_____
<u>5</u>	Gas Piping	<u>\$100</u>
_____	LP Gas Tank	_____
_____	Steam Boiler	_____
_____	Hot Water Boiler	_____
_____	Sewer Pump	_____
_____	Interceptor/Separator	_____
_____	Backflow Preventor	_____
_____	Greasetrap	_____
_____	Sewer Connector	_____
_____	Water Service Connection	_____
_____	Stacks	_____
<u>5</u>	Other <u>COND DRAIN</u>	<u>\$100</u>

☐ Private Septic

☐ Private Well

Administrative Surcharge _____

Minimum Fee _____

State Permit Surcharge Fee \$2

TOTAL FEE \$202

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

Block 144.23 Lot 6.06 Qualification Code _____

Work Site Location: 1208 COLUMBUS ROAD Burlington Township, NJ

Owner in Fee: M & V ASSOCIATES, LLC

Address 1208 COLUMBUS RD BURLINGTON NJ 08016

_____ Email _____

Tel. _____

Contractor: HUTCHINSON

Address 621 CHAPEL AVENUE CHERRY HILL NJ 08034-

_____ Email _____

Tel. (856) 429-5807 Fax. (856) 429-4995

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

Contractor License No. _____ Expiration Date: _____

Federal Employee No. 21-0696069

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed R-5

Building Sewer Size _____ ☐ Public Sewer ☐ Private Septic

Water Service Size _____ ☐ Public Water ☐ Private Well

Estimated Cost of Plumbing Work \$800

JOB SUMMARY (Office Use Only)		Truss Sys./Bracing				
PLAN REVIEW	Date	Initial				
☐ No Plan Required			INSPECTIONS			
☐ Partial Underslab Utilities Approved			Type:	Failure	Failure	Approval
Date: _____ by: _____			Slab	_____	_____	_____
☐ Plumbing Plans Approved			Rough	_____	_____	_____
Date: _____			Water	_____	_____	_____
Approved by: _____			Sewer	_____	_____	_____
Joint Plan Review Required			Fixtures	_____	_____	_____
☐ Building ☐ Electrical			Gas Equipment	_____	_____	_____
☐ Fire ☐ Elevator			Gas Piping	_____	_____	_____
SUBCODE APPROVAL for PERMIT			LPGas Tank	_____	_____	_____
Date: _____			Fuel Oil Piping	_____	_____	_____
Approved by: _____			Solar	_____	_____	_____
SUBCODE APPROVAL for CERTIFICATE			TCO	_____	_____	_____
☐ CO ☐ CCO ☐ CA			Final	_____	_____	_____
Date: _____			Other	_____	_____	_____
Approved by: _____						

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

U.C.C F130 (rev. 11/09)

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



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Administrative Surcharge

Minimum Fee

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☐ Fire ☐ Elevator			Gas Equipment	_____	_____	_____	_____
SUBCODE APPROVAL for PERMIT			Gas Piping	_____	_____	_____	_____
Date: _____			LPGas Tank	_____	_____	_____	_____
Approved by: _____			Fuel Oil Piping	_____	_____	_____	_____
SUBCODE APPROVAL for CERTIFICATE			Solar	_____	_____	_____	_____
☐ CO ☐ CCO ☐ CA			TCO	_____	_____	_____	_____
Date: _____			Final	_____	_____	_____	_____
Approved by: _____			Other	_____	_____	_____	_____

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