



PLUMBING SUBCODE
TECHNICAL SECTION



Date Received 6/14/2012
Control # 43025
Date Issued 6/14/2012
Permit # 120531

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	
WATER HEATER	
NO.	FEE (Office Use Only)
_____	Water Closet _____
_____	Urinal/Bidet _____
_____	Bath Tub _____
_____	Lavatory _____
_____	Shower _____
_____	Floor Drain _____
_____	Sink _____
_____	Dishwasher _____
_____	Drinking Fountain _____
_____	Washing Machine _____
_____	Hose Bibb _____
<u>1</u>	Water Heater <u>\$20</u>
_____	Fuel Oil Piping _____
_____	Gas Piping _____
_____	LP Gas Tank _____
_____	Steam Boiler _____
_____	Hot Water Boiler _____
_____	Sewer Pump _____
_____	Interceptor/Separator _____
_____	Backflow Preventor _____
_____	Greasetrap _____
_____	Sewer Connector _____
_____	Water Service Connection _____
_____	Stacks _____
_____	Other _____

☐ Private Septic
☐ Private Well

Administrative Surcharge _____

Minimum Fee \$60

State Permit Surcharge Fee \$1

TOTAL FEE \$61

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

Block 19 Lot 16 Qualification Code _____

Work Site Location: 20 CENTRAL AVENUE , NJ

Owner in Fee: METZ, PARTICIA

Address 20 CENTRAL AVENUE BURLINGTON TWP NJ 08016-

_____ Email _____

Tel. 609/4403651

Contractor: FANTES HEATING & AIR INC

Address 35 CHARLESTON ROAD WILLINGBORO NJ 08046-

_____ Email _____

Tel. 609/8351512 Fax. _____

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

Contractor License No. _____ Expiration Date: _____

Federal Employee No. 22-3134116

B. PLUMBING CHARACTERISTICS

Use Group Present R-3 Proposed R-3

Building Sewer Size _____ ☐ Public Sewer ☐ Private Septic

Water Service Size _____ ☐ Public Water ☐ Private Well

Estimated Cost of Plumbing Work \$700

JOB SUMMARY (Office Use Only)		Truss Sys./Bracing					
PLAN REVIEW	Date	Initial	INSPECTIONS				
☐ No Plan Required			Type:	Failure	Failure	Approval	Initial
☐ Partial Underslab Utilities Approved	Date: _____ by: _____		Slab	_____	_____	_____	_____
☐ Plumbing Plans Approved	Date: _____		Rough	_____	_____	_____	_____
Approved by: _____			Water	_____	_____	_____	_____
Joint Plan Review Required			Sewer	_____	_____	_____	_____
☐ Building ☐ Electrical			Fixtures	_____	_____	_____	_____
☐ 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	_____	_____	_____	_____

☐ 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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Minimum Fee <u>\$60</u>	
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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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