Township Archives
Township of Brick, NJ
401 Chambers Bridge Rd, Brick, NJ 08723

This File Contains Personal Identifiable Information of Private Citizen(s).

Certain information contained in this file is ***Exempt from Release*** under the Open Public Records Act (OPRA) (Public Law 2001, CHAPTER 404 (N.J.S.A. 47:1A-1 et seq.)) and Executive Orders issued by the Governor of New Jersey. The following information ***MUST*** be redacted prior to release:

- Social Security Numbers
- Drivers' License Numbers
- Unlisted Phone Numbers
- Credit Card Numbers
- Bank Account Numbers and Balances

For further information, consult with the Township Clerk, Township Archivist or Township Attorney prior to release.

Bryan J. Dickerson, CA, CMR
Township Archivist

Issued: 8 January 2020

BLOCK 1399.24 LOT 95 QUALIFICATION CODE _____ ADDRESS (SITE) 506 Nebraska PERMIT NO. 20-2294

CONSTRUCTION PERMIT APPLICATION

C-20-002886

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII

I. IDENTIFICATION

1. Propsed Work Site at: 506 Nebraska
2. Name of Owner in Fee: Jeremy Roberts Tel. [redacted]
   Address 1411 Lexington Ave, Lakewood (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: ELITE HEATING & COOLING Tel. ( ) _____
   Address 1584 MT EVEREST LANE
   License No. OR, if new home, Builder Reg. No. 19HC00681300 Exp. Date _____
   Federal Employee No. 651305318 FAX: ( ) _____
5. Architect or Engineer _____ Tel. ( ) _____
   Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun Ed Brown
   Tel. (732) 278 1115 FAX: ( ) _____

Dual fuel gas

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$	150 ✓	
2.	Electrical			
3.	Plumbing			
4.	Fire Protection			
5.	Elevator Devices			
6.	Subtotal Mech	$	125 ✓	175 ✓
7.	Less 20% for State Plan Review			
8.	Subtotal	$		
9.	State Permit Surcharge Fee		5 —	
10.	Subtotal	$		
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$	280 —	

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1.	Number of Stories	
2.	Height of Structure ft.	
3.	Area — Largest Floor sq. ft.	
4.	New Building Area sq. ft.	
5.	Volume of New Structure cu. ft.	
6.	Construction Classification	
7.	Total Land Area Disturbed sq. ft.	
8.	Flood Hazard Zone	
9.	Base Flood Elevation ft.	
10.	Wetlands yes	
	no	
11.	Max. Live Load	
12.	Max. Occupancy Load	

II. PROPOSED WORK

OPTIONAL (for office use only)

		Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1.	☐ Minor Work									
2.	☐ New Building									
3.	☐ Addition									
4.	☐ a. Repair		CW	9/2/20						
	☐ b. Alteration									
	☐ c. Renovation									
	☐ d. Reconstruction									
5.	☐ Fire Protection									
6.	☐ Plumbing ☒ Mechanical					9-14-20	AW			
7.	☐ Electrical					9/5/20	TG			
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition									
	TOTAL COSTS	3000 —								

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1) IBC 2018 NJ
2. ☐ Multi-Family (R-2) IBC 2018 NJ
3. ☐ Two-Family (R-3) IBC 2018 NJ
4. ☐ Two-Family (R-5) IRC 2018 NJ
5. ☐ One-Family (R-3) IBC 2018 NJ
6. ☐ One-Family (R-5) IRC 2018 NJ

No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

1. State Specific Use:
2. Use Group:
3. Change In Use Group, Indicate Former:

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 11/02/2020
Control Number C-20-002886
Permit Number 20-2294
Permit Issue Date 09/29/2020
Certificate Number 20-2294

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 506 NEBRASKA AVE. Brick Township, NJ Block: 1399.24 Lot: 95 Qual:

Owner in Fee: JEREMY ROBERTS

Owner Address: 1411 LEXINGTON AVE LAKEWOOD NJ 08701

Telephone: [redacted]

Contractor ELITE HEATING AND COOLING

Address 1584 MT. EVEREST LANE TOMS RIVER NJ

Telephone: (732) 363-8654 Fax: (732) 364-0966 Federal Emp. Number: 65-1305318

License Number or Builders Registration Number:

Home Warranty Number: Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: OIL TO GAS CONVERSION

Certificate Comments:

☐ **Certificate of Occupancy**
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.

☑ **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.

☐ **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 Compliance**
The following conditions must be met no later than
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

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

☐ **Certificate of Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (years); see file

☐ **Certificate of Compliance**
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

☐ **Temporary Certificate of Occupancy**
The following conditions must be met no later than:
or the owner will be subject to fine or order to vacate:
This certificate has an expiration date of:
Conditions to be met:

David J. Newman Jr

Construction Official

Date Printed: 11/02/2020

U.C.C. F260 (rev. 08/05)

Fee: $0.00
Check Number:
Collected By:

MECHANICAL INSPECTOR
TECHNICAL SECTION

Date Received Control # 9/29/20

Date Issued Permit # 20-2294

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

Block B99.24 Lot 95 Qualification Code

Work Site Location 506 Nebraska Brick

Owner in Fee: Roberts

Tel. ( ) e-mail

Address 141 Wesley Ave. Tolerant NJ 0870 1
street municipality zip code

Contractor: ELITE Heating & Cooling Tel. (732) 363 8654

Address 1584 Rt EVEREST Inn e-mail

Toms River

Contractor License No. or Builder Registration No. 19HC00681300 Exp. Date 6/30/21

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 651305318

Federal Emp. ID No. 651305318 FAX: ( )

B. MECHANICAL CHARACTERISTICS

Use Group: Present: R-3, R-4 or R-5 *(circle one)* Proposed: R-3, R-4 or R-5 *(circle one)*

Heating System work: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Type: [ ] Hydronic [ ] Hot Air

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Estimated Cost of Mechanical Work $ 2500

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Mechanical Plans Approved
Date: 9-14-20 Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 9-18-20
Approved by:

SUBCODE APPPROVAL for CERTIFICATE
[ ] CA [ ] CCO
Date: 10-22-20
Approved by:

INSPECTIONS Type:	DATES Failure	Failure	Approval	Initial
Gas Piping	10-1-20		10-6-20	
Appliance				
Chimney/Vent				
Oil Piping				
Oil Tank				
LPG Tank				
Hydronic Piping				
Fireplace				
Chimney Cert.				
Other FINAL	10-15-20		10-20-20	

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.

Sign here: Edward Brown

Print name here: EDWARD BROWN

D. TECHNICAL SITE DATA

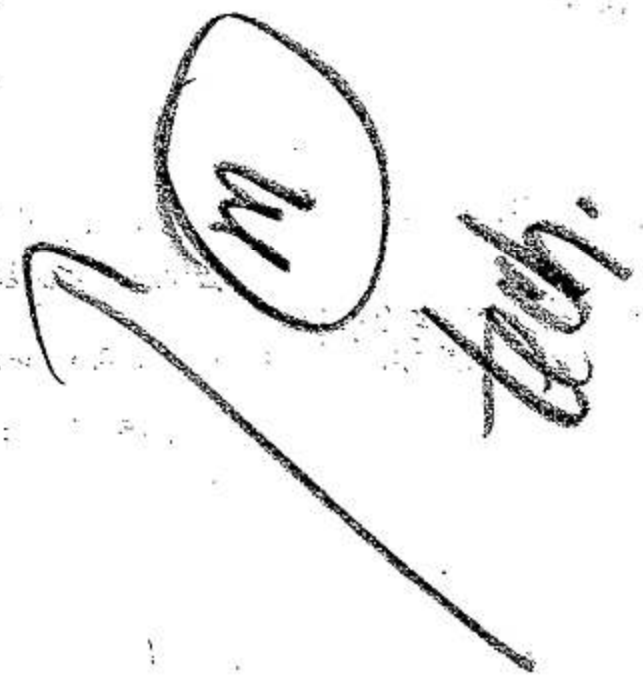
DESCRIPTION OF WORK
Change Furnace: oil to Nat Gas
A) New 60,000 BTU Nat Gas Furnace
B) Plenum Changes
C) New Smoke piping to Chimney

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Heater	$
	Fuel Oil Piping Connections	
1	Gas Piping Connections	
	Steam Boiler	
	Hot Water Boiler	
1	Hot Air Furnace	
	Oil Tank	
	LPG Tank	
	Fireplace	
	Other	

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

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

10-1-20 AD
Floors Being done
10-15-20 WM
See Correction photos
Construction Air
No Furnace Filter
Crawl Access Locked



ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 9/29/20
Control #
Date Issued
Permit # 20-3394

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

Block 1399-24 Lot 95 Qualification Code
Work Site Location 506 Nebraska Ave

Owner in Fee Jeremy Roberts
Address 506 Nebraska Ave 3333
Brooklawn

Tel ( )
Contractor
Address S. Lake Electrical LLC.
316 1st Street
Lakewood, NJ 08701
Tel. 7325347227
Contractor license no. 17471
Fed Emp. No. 46-1848500
office@southlakeelectricnj.com

Tel ( ) FAX ( )
Contractor License No.
Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 150

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 [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		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	
1		FURNACE REPLACEMENT 115 VOLT	

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved spec
Date: 9/30 T.O.
Approved by:

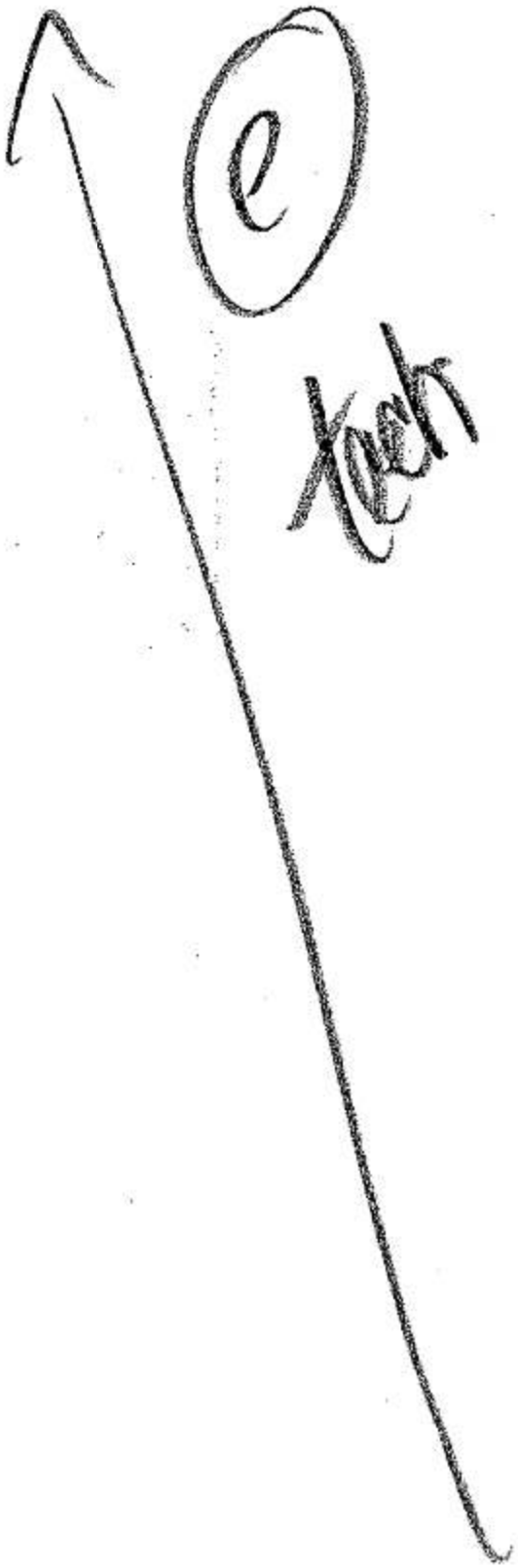
SUBCODE APPROVAL
[ ] CO [ ] CCO [X] CA
Date: 10-19-2020
Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final	10-16-2020 VM		10-16-20	SH
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

Wire Run in Duct Work Ln.
10/K-020



FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #

Date Issued
Permit #

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

Block 1399.24 Lot 95 Qualification Code

Work Site Location 506 Nebraska Beach.

Owner in Fee: Roberts

Tel. ( ) e-mail

Address 1411 Lexington Avenue Lakewood, NJ 0870/

Contractor: ELDE Heating Cooling Tel. (732) 363-9654
(city, municipality, zip code)

Address 1584 mt EVEREST Lane Tel.
Toms River

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No. 19HC00681300 Exp. Date 6/30/21

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

Federal Emp. ID No. 651305318 FAX: ( )

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed

Constr. Class: Present Proposed

Heating System: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [ ] Replacement

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Location:

Total Cost of Fire Protection Work $ 500

Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible
Capacity

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:

Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Fire Protection Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and all statements contained in this application.

Applicant sign/Contractor sign and seal here: Edward Brown

Print name here: Edward Brown [ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only) $
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		
Fireplace Venting/Metal Chimney		
Other		

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

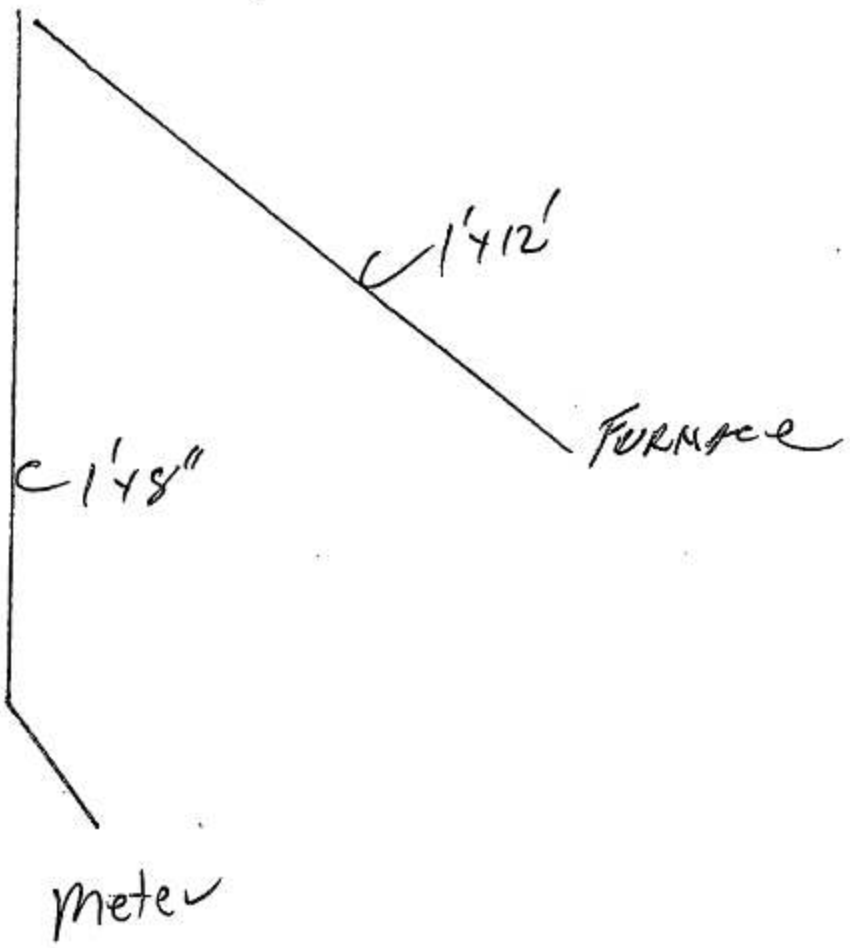
TOTAL FEE $

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

506 Nebraska Brick

Total BTU 88,000

Total piping 201



JOB COPY

PLUMBING

SEP 1 4 2020

APPROVED

MECHANICAL INSPECTION
TECHNICAL SECTION

Update

Date Received
Control #
Date Issued
Permit #

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

Block 1399.24 Lot 95 Qualification Code

Work Site Location 506 NEBRASKA DRIVE
BRICK, NEW JERSEY

Owner In Fee: Jerry Roberts

Tel. 732 504-1899 e-mail

Address 1911 Lexington Ave Lakewood NJ
street municipality zip code

Contractor: JW HUGHES INC T/A JIMHUGHES PLBG&H Tel. (732) 364-3636

Address 280 FARADAY AVE e-mail jimhughes plbg@aol.com
JACKSON, NJ 08527

Contractor License No. BIO-9234 Exp. Date 06/30/2021

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 223039252 FAX: (732) 364-3462

B. MECHANICAL CHARACTERISTICS

Use Group Present: R-5

Heating System work: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [✓] Replacement

Type: [ ] Hydronic [ ] Hot Air

Fuel Type: [✓] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Estimated Cost of Mechanical Work $ 200

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[N] Mechanical Plans Approved
Date: 9-22-20 Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire.
[ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 9-22-20
Approved by:
SUBCODE APPPROVAL for CERTIFICATE
[N] CO [ ] TCO
Date: 10-22-20
Approved by:

INSPECTIONS Type:	DATES Failure	Failure	Approval	Initial
Gas Piping	10-1-20		10-6-20	W
Appliance				
Chimney/Vent				
Oil Piping				
Oil Tank				
LPG Tank				
Hydronic Piping				
Fireplace				
Chimney Cert.				
Other FINAL			10-20-20	W

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.
Applicant sign/Contractor sign and seal here:

Print name here: JAMES W. HUGHES

[✓] Licensed Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
REMIOVE OLD HEATER AND INSTALL NEW GAS HEATER

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Heater	$
	Fuel Oil Piping Connections	
1	Gas Piping Connections	
	Steam Boiler	
	Hot Water Boiler	
	Hot Air Furnace	
	Oil Tank	
	LPG Tank	
	Fireplace	
	Generator	
	Other	
	Administrative Surcharge	$
	Minimum Fee	$
	State Permit Surcharge Fee	$
	TOTAL FEE	$

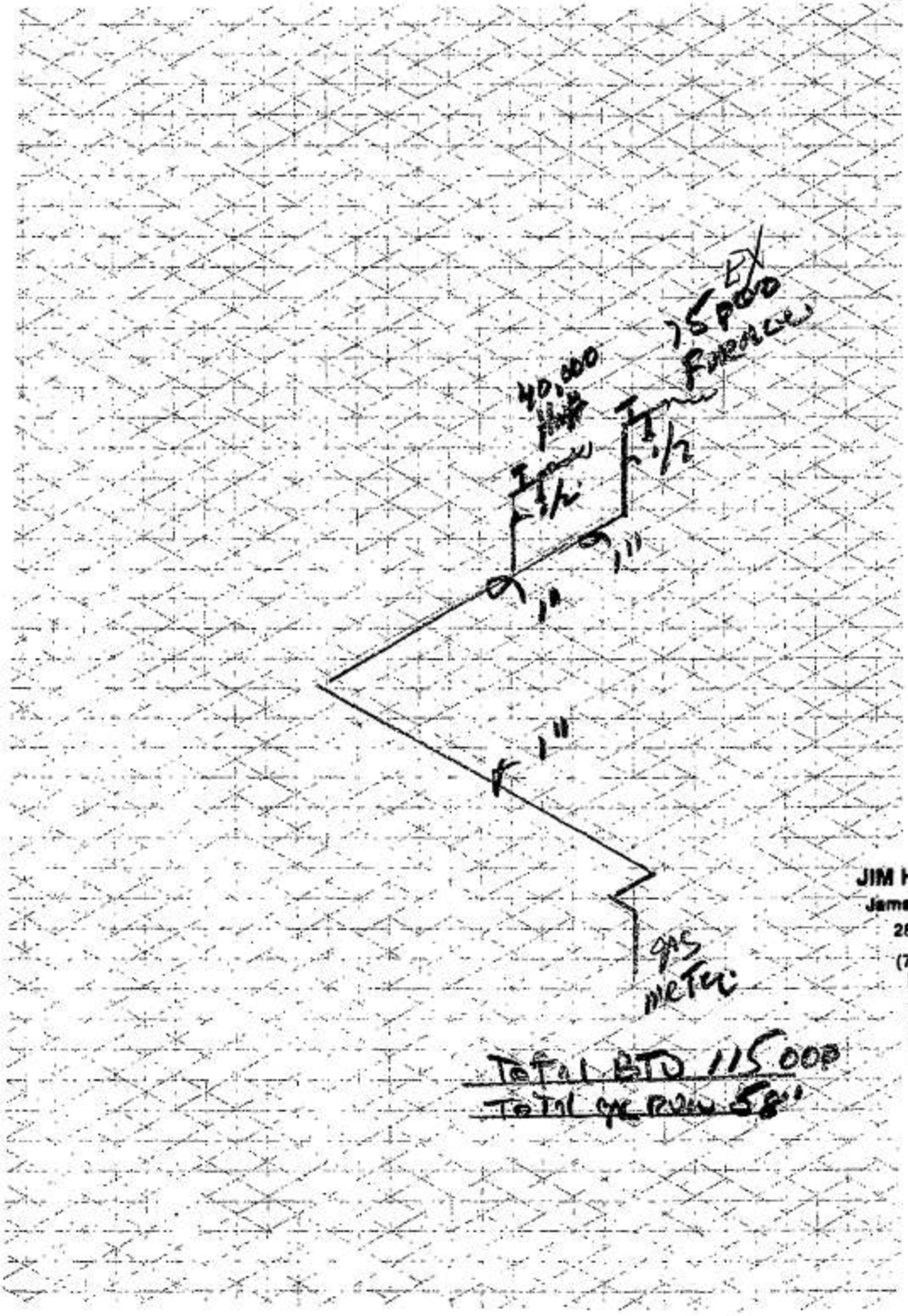
Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

JOB COPY

PLUMBING

SEP 22 2020

APPROVED



JIM HUGHES PLUMBING & HEATING
James W. Hughes Plumbing License # 9234
289 Faraday Ave., Jackson, NJ 08527
(732) 364-3636 (Fax (732) 364-3462
email: jhughesplbg@aol.com

401 Chambers Bridge Road
Brick, NJ 08723
732-262-1030

Brick Township

CORRECTION NOTICE

ADDRESS 506 NEBRASKA

PERMIT NUMBER 20-2294 BLOCK _____ LOT _____

OWNER _____

Upon inspection, violations of the ____ Building X Plumbing ___ Electric ___ Fire Code were in evidence and the following orders are hereby issued for their correction:

COMBUSTION AIR FOR FURNACE & WATER HEATER
NO FURNACE FILTER.
CRAWL ACCESS LOCKED.

PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED.

DATE 10-15-20 INSPECTOR WM

PERMIT UPDATE

Date Update Issued 9/29/20
Control # C-20-002886+A
Permit # +A
20-2294

IDENTIFICATION Block: 1399.24 Lot: 95 Qualifier
Work Site Location: 506 NEBRASKA AVE. Brick Township, NJ
Contractor: ELITE HEATING AND COOLING
Address: 1584 MT. EVEREST LANE TOMS RIVER NJ

Owner in Fee: JEREMY ROBERTS
1411 LEXINGTON AVE LAKEWOOD NJ 08701

Telephone: [redacted]

Telephone: (732) 363-8654
Lic. No. or Bldrs. Reg. No. 13VH00334600 19HC00681300
Federal Employee. No. 65-1305318

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☐ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☐ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☑ OTHER

DESCRIPTION OF WORK:
OIL TO GAS CONVERSION ...UPDATE +A- WH

Note: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $200

Construction Official (signature) Date 9/22/20

PAYMENTS (Office Use Only)	
Building	$0
Electrical	$0
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$75.00
DCA Training Fee	$0
CO Fee	
Other	$0
Total	$75
Check No.	
Cash	$0
Credit	$0
Collected By	(initials)

09/29/20 2:15PM 0015308-0454 ... CERU 003 #2224 RECPT CHECK $75.00 $75.00

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☑ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases 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 filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☑ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☑ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

CONSTRUCTION PERMIT

Date Issued 9/29/20
Control # C-20-002886
Permit # 20-2294

IDENTIFICATION Block: 1399.24 Lot: 95 Qualifier
Work Site Location: 506 NEBRASKA AVE. Brick Township, NJ
Contractor ELITE HEATING AND COOLING
Address 1584 MT. EVEREST LANE TOMS RIVER NJ
Owner in Fee JEREMY ROBERTS
1411 LEXINGTON AVE LAKEWOOD NJ 08701
Telephone: (732) 363-8654
Lic. No. or Bldrs. Reg. No. 13VH00334600 19HC00681300
Telephone: [redacted]
Federal Employee. No. 65-1305318

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☐ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☑ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☑ OTHER

DESCRIPTION OF WORK:
OIL TO GAS CONVERSION

Note: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $2,650

Construction Official
Date 9/21/20

PAYMENTS (Office Use Only)

Building	$0
Electrical	$150
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$125.00
DCA Training Fee	$5
CO Fee	
Other	$0
Total	$280
Check No.	
Cash	$0
Credit	$0

09/29/20 Collected By

U.C.C. F170
equiv (rev 1/04)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☑ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases 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 filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements.

☑ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☑ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 9/29/20
Control #
Date Issued
Permit # 20-2294

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

Block 1399-24 Lot 95 Qualification Code
Work Site Location 506 Nebraska Ave

Owner in Fee Jeremy Roberts
Address 506 Nebraska Ave Brick Town

Tel ( )
Contractor
Address S. Lake Electrical LLC. 316 1st Street Lakewood, NJ 08701

Tel ( ) FAX ( ) Tel. 7325347227
Contractor License No. Contractor license no. 17471
Federal Emp. No. Fed Emp. No. 46-1848500

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed office@southlakeelectricnj.com
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 150

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 [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		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	
1		FURNACE REPLACEMENT 115 VOLT	

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

[ ] No Plans Required

Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Fire [ ] Elevator
[ ] Elec. Plans Approved spec
Date: 9/30 T.C.
Approved by:

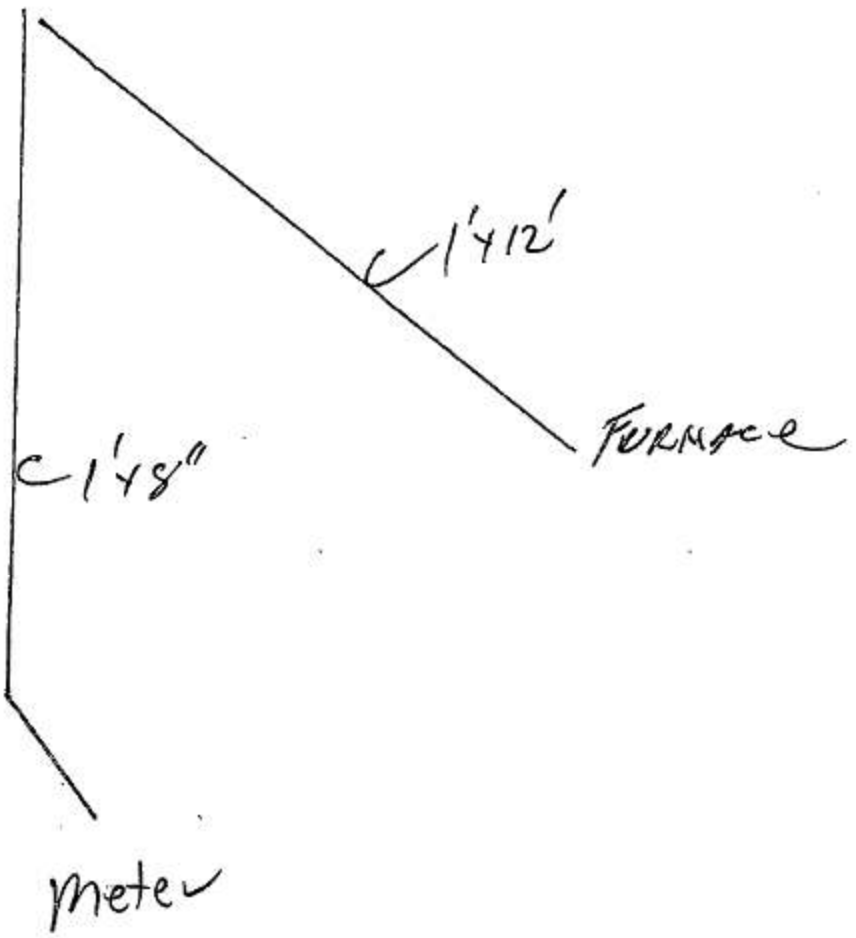
SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. 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

506 Nebraska Brick
Total BTU 88,000
Total piping 201



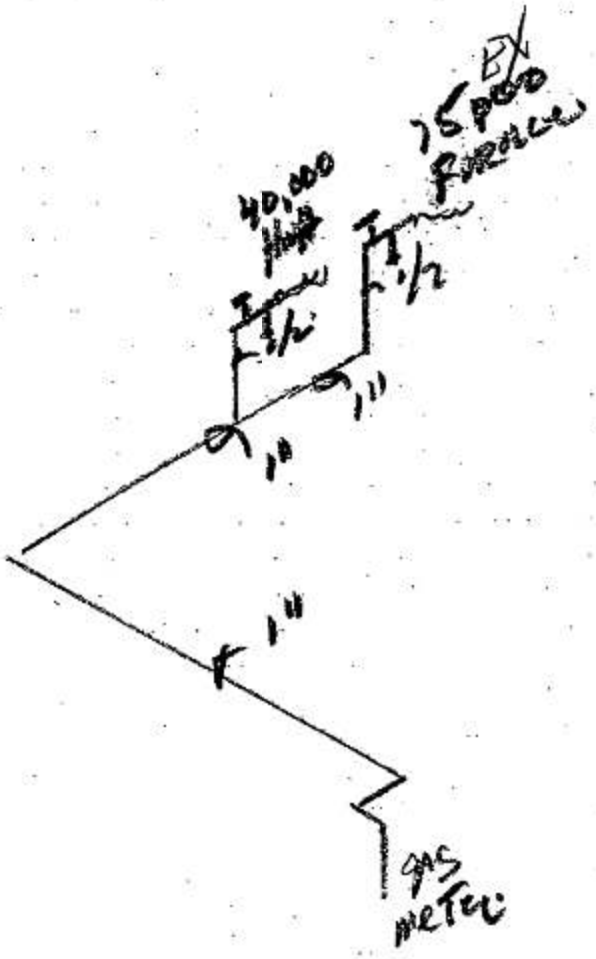
JOB COPY
PLUMBING
SEP 14 2020
APPROVED

JOB COPY

PLUMBING

SEP 22 2020

APPROVED



Total BTU 115,000

Total GAS RUN 58'

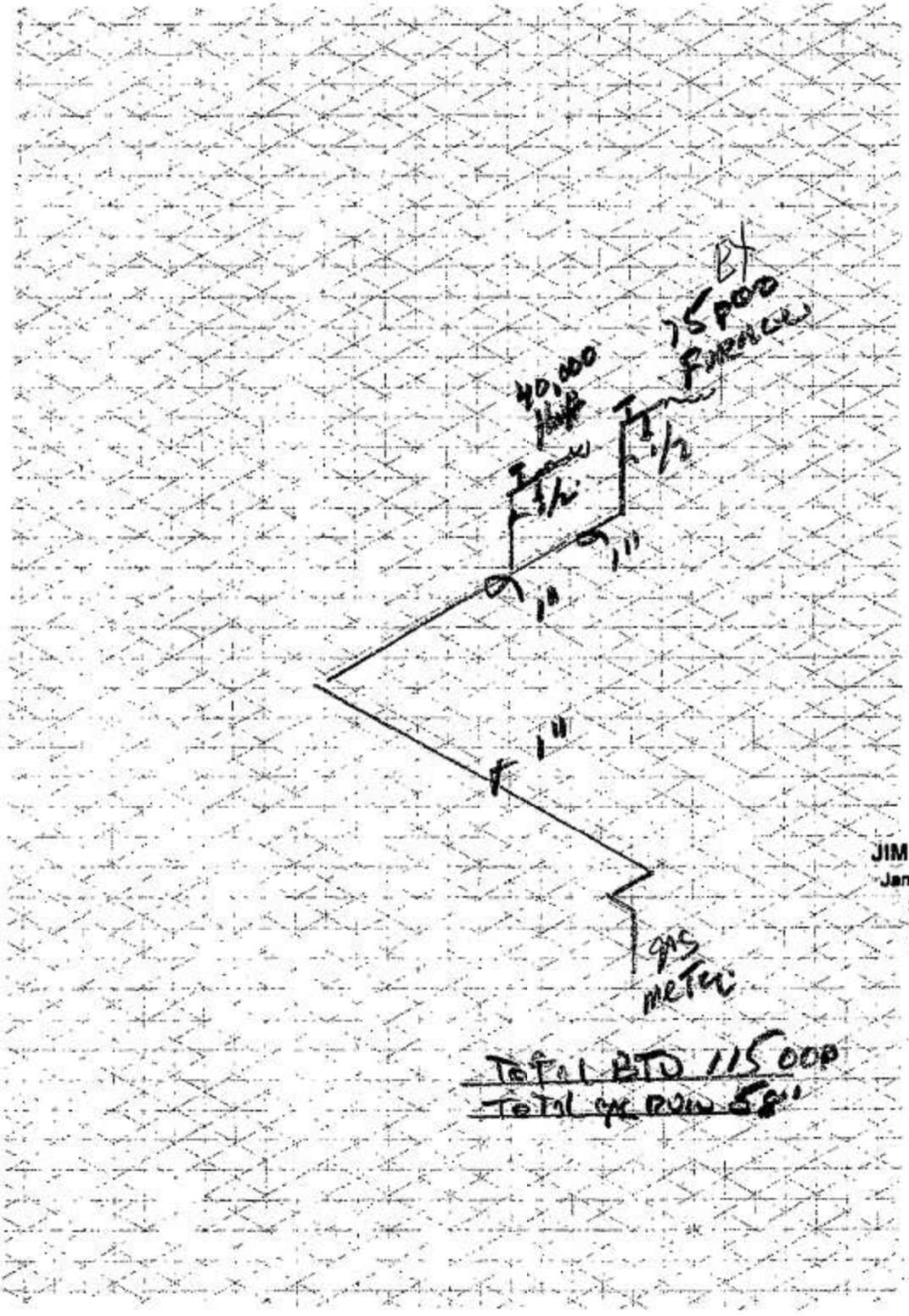
JIM HUGHES PLUMBING & HEATING
James W. Hughes Plumbing License # 9234
260 Faraday Ave. Jackson, NJ 08527
(732) 364-3838 Fax (732) 364-3462
Email: jimhughesplbg@aol.com

FILE COPY

PLUMBING

SEP 22 2020

APPROVED



JIM HUGHES PLUMBING & HEATING
James W. Hughes Plumbing License # 9234
280 Faraday Ave. Jackson, NJ 08527
(732) 364-3636 Fax (732) 364-3462
Email: jimhughesplbg@aol.com

506 Nebrask

CHIMNEY VERIFICATION FOR REPLACEMENT OF FUEL-FIRED EQUIPMENT

BLOCK 1399.24 LOT 95 QUALIFICATION CODE _____ PERMIT # _____

WORK SITE ADDRESS 506 NEBRASKA DRIVE BRICK, NEW JERSEY

Owner in Fee Jeremy Roberts

Verifying Individual JAMES W. HUGHES Company J.W. HUGHES INC. T/A JIM HUGHES PLUMBING & HEATING

Address 280 FARADAY AVE (Street) JACKSON (City) NJ (State) 08527 (Zip Code)

Tel: (732) 364-3636 Fax: (732) 732-364-3462

Check the Appropriate Box(es):

Type of Replacement:

- ☐ Oil to Gas Conversion
- ☐ Gas to Oil Conversion
- ☑ Gas Appliance Replacement
- ☐ Oil to Oil Replacement
- ☐ Other _____

Existing Vent/Chimney: **Size** _____

- ☑ "B" Label Vent
- ☐ "L" Label Vent
- ☐ Flexible Liner
- ☐ Power Vent/Exhauster
- ☐ Chimney-Interior
- ☐ Chimney-Exterior
- ☐ Masonry Chimney-Tile Lined
- ☐ Masonry Chimney-Unlined
- ☐ Other _____

	Type	Fuel Type	BTU Rating (input/hour)
Appliance 1:	HOT WATER HEATR	Oil / (Gas) / Other: GAS	40 gallon
Appliance 2:	_____	Oil / Gas / Other: _____	_____
Appliance 3:	_____	Oil / Gas / Other: _____	_____

CHIMNEY LINER

If a chimney liner is being installed, all documentation on the liner must accompany the Permit application.

Manufacturer: _____ Model: _____ UL Listing: _____

Material of Liner: Stainless Steel _____ Aluminum _____

Size of Appliance Vent: _____ Size of Liner: _____ Height of Chimney: _____

Length of Connector: _____ Vent Connector Rise: _____

How does the appliance vent? ☑ Natural Draft ☐ Fan-assisted ☐ Other: _____

PLEASE SIGN ONE OF THE FOLLOWING VERIFICATION STATEMENTS

For Oil or Coal to Gas Conversions:

I have verified that the chimney/vent is in good repair and clear of obstruction and is substantially clean of residue from its previous use serving an oil or coal appliance. I have verified that the chimney/vent is appropriately lined and sized for the appliance(s) being installed.

_____ 9-14-2020
Signature Date

Oil to Oil or Gas to Gas Replacements or New/Additional Appliances:

I have verified that the existing chimney/vent is in good repair and clear of obstruction. I have verified that the existing chimney/vent is appropriately lined and sized for the appliance(s) being installed and/or remaining.

X _____ 9-14-2020
Signature Date

Direct Vent Appliance:

I hereby verify that the appliance(s) being installed is a direct vent appliance. I further verify that the existing chimney/vent is appropriately lined and sized for any remaining appliances.

_____
Signature Date

Verification Not Submitted:

I choose not to submit verification. I understand that I will be required to be present for the inspection to remove and reinstall the chimney vent connector.

_____
Signature Date

FOR MINOR AND EMRGENCY WORK, THIS FORM MUST BE PROVIDED WITH YOUR PERMIT APPLICATION. FOR ALL OTHER WORK, THIS FORM MUST BE PRESENTED TO THE CODE OFFICIAL PRIOR TO FINAL INSPECTION.

Save As

All applicable information requested on this form must be supplied.
This form may not be submitted by a homeowner in lieu of the required inspection.

Print

BRADFORD WHITE®
WATER HEATERS

Residential Atmospheric Vent Gas Water Heater

Photo is of RG240T6N

The Atmospheric Vent FVIR Defender Safety System® Models Feature:

- **Bradford White ICON System™***—Intelligent gas control with proven millivolt powered technology and built-in piezo igniter. A standard, off the shelf thermopile converts heat energy from the pilot flame into electrical energy to operate the gas valve and microprocessor. No need for external electricity.
  - **Enhanced Performance**—Proprietary algorithms provide enhanced First Hour Rating and tighter temperature differential.
  - **Advanced Temperature Control System**—Microprocessor constantly monitors and controls burner operation to maintain consistent and accurate water temperature levels.
  - **Intelligent Diagnostics**—An exclusive green LED light prompts the installer during start-up and provides ten different diagnostic codes to assist in troubleshooting.
  - **Pilot On Indication**—Flashing green LED provides positive indication that pilot is on.
  - **Separate Immersed Thermowell**—High-strength advanced polymer composite thermowell provides isolation between electric temperature sensor and surrounding water. No need to drain the tank when removing gas valve.
- **Advanced ScreenLok® Technology Flame Arrestor Design**—Flame arrestor is designed to prevent ignition of flammable vapor outside of the water heater.
- **Resettable Thermal Switch**—Proven and reliable bimetallic switch prevents burner and pilot operation in case of ongoing flammable vapor burn inside of the combustion chamber or restricted air flow.
- **Maintenance-Free**—No regular cleaning of air inlet openings or flame arrestor is required under normal conditions.
- **Sight Window**—Offers a view into the combustion chamber to observe the operation of the pilot and burner.
- **Factory-Installed Hydrojet® Total Performance System**—Sediment reducing device that also increases first hour delivery of hot water while minimizing temperature build-up in tank.
- **Vitraglas® Lining**—An exclusively engineered enamel formula that provides superior tank protection from the highly corrosive effects of hot water. This formula (Vitraglas®) is fused to the steel surface by firing at a temperature of over 1600°F (871°C).
- **Insulation System**—Non-CFC foam covers the sides and top of the tank, reducing heat loss. This results in less energy consumption, improved efficiencies, and jacket rigidity.
- **Pedestal Base.**
- **Water Connections**—3/4" NPT factory installed true dielectric fittings.
- **Factory-Installed Heat Traps.**
- **Protective Magnesium Anode Rod.**
- **3x4 "Snap Lock" Draft Diverter**—Allows either 3" or 4" vent connections with inputs of 40,000 BTU/Hr. or less. Over 40,000 BTU/Hr. has the 4" "Snap Lock" Draft Diverter.
- **T&P Relief Valve**—Installed.
- **Low Restrictive Brass Drain Valve**—Durable tamper proof design.
- **NOx Emissions – Less than 40 ng/J.**

*May vary by region

FEATURING:

ICON System®
Hydrojet
DEFENDER Safety System®

AUDI CERTIFIED

6 or 10-Year Limited Tank Warranties / 6 or 10-Year Limited Warranty on Component Parts.

For more information on warranty, please visit www.bradfordwhite.com

For products installed in USA, Canada and Puerto Rico. Some states do not allow limitations on warranties. See complete copy of the warranty included with the heater.

MANUFACTURED UNDER ONE OR MORE OF THE FOLLOWING U.S. PATENTS: 5,582,666; 7,634,975; 5,660,165; 5,954,492; 6,056,542; 6,935,290; 5,372,185; 5,485,879; 5,574,822; 7,971,560; 7,992,526; 6,684,821; 6,442,178; 7,334,419; 7,866,168; 7,270,087; 7,007,748; 5,596,952; 6,142,216; 7,699,026; 5,341,770; 7,337,517; 7,665,211; 7,665,210; 7,063,132; 7,063,133; 7,559,293; 7,900,599; 5,943,984; 8,082,888; 5,988,117; 7,621,238; 7,650,869; 5,761,379; 7,409,925; 6,277,171; 8,146,772; 7,458,341; 2,262,174. OTHER U.S. AND FOREIGN PATENT APPLICATIONS PENDING. CURRENT CANADIAN PATENTS: 2,314,845; 2,504,824; 2,108,185; 2,143,031; 2,409,271; 2,548,958; 2,112,515; 2,476,685; 2,299,007; 2,092,105; 2,107,012. Defender Safety System®, ScreenLok®, Vitraglas® and Hydrojet® are registered trademarks of Bradford White® Corporation.

Residential Atmospheric Vent Gas Water Heater

Atmospheric Vent Models

NATURAL GAS AND LIQUID PROPANE GAS

Meet or exceed ASHRAE 90.1b (current standard) C.E.C. Listed
Recovery efficiency ranging up to 80%

Model Number	Nominal Capacity U.S. Gal.	Nominal Capacity Imp. Gal.	DOE Rated Storage Volume (Gal.)	Nat. BTU/Hr. Input	LP BTU/Hr. Input	First Hour Rating (Gal.)	Uniform Energy Factor	Recovery 90°F Rise* Nat. U.S. GPH	Recovery 90°F Rise* Nat. Imp. GPH	Recovery 90°F Rise* LP U.S. GPH	Recovery 90°F Rise* LP Imp. GPH	A Floor to Flue Conn. in.	B Jacket Dia. in.	C Vent Size in.	D Floor to T&P Conn. in.	E Floor to Gas Conn. in.	F Floor to Water Conn. in.	G Floor to Top of Heater in.	H Depth in.	Approx. Shipping Weight lbs.
RG130T6N•	30	25	28	27,000	27,000	53	0.60	29	24	29	24	59 11/16	16	3X4	49 3/8 / 56 3/8	12 11/16	57 1/16	56 3/8	19 1/2	109
RG230T6N•	30	25	28	32,000	31,000	59	0.61	34	28	33	23	59 15/16	18	3X4	49 7/8 / 56 3/8	12 11/16	57 1/16	56 3/8	21 1/2	116
RG230S6N	30	25	28	30,000	32,000	57	0.60	32	37	32	27	49 1/4	20	3X4	38 5/8	12 11/16	46 1/2	45 11/16	23 1/2	113
RG140T6N•	40	33	38	34,000	34,000	69	0.59	37	31	37	31	61 1/2	18	3X4	51 1/2 / 60	12 11/16	59 1/4	57 15/16	21 1/2	132
RG240T6N•	40	33	38	40,000	36,000	74	0.59	43	36	34	33	60 5/16	20	3X4	50 1/8 / 56 5/8	12 11/16	57 9/16	56 3/4	23 1/2	134
RG240S6N•	40	33	38	40,000	35,000	73	0.59	43	36	41	34	51 3/4	22	3X4	41 / 47 1/4	12 11/16	49 3/16	48 3/16	25 1/2	139
RG150T6N•	50	42	47	34,000	34,000	80	0.63	37	31	37	31	60 5/16	20	3X4	50 / 56 3/8	12 11/16	57 5/8	56 3/4	23 1/2	150
RG250T6N•	50	42	48	40,000	35,000	86	0.65	43	36	41	34	60 5/16	22	3X4	49 7/8 / 57	12 11/16	57 5/8	56 3/4	25 1/2	154
RG250L6N	48	40	47	40,000	35,000	85	0.63	43	36	41	34	51 13/16	24	3X4	40 5/8	12 11/16	49 3/16	48 3/16	27 1/2	170
RG250S6N•	50	42	47	50,000	48,000	89	0.63	54	45	52	45	60 5/8	22	4	49 7/8 / 57	12 11/16	57 5/8	56 3/4	25 1/2	167

Model Number	Nominal Capacity Liters	DOE Rated Storage Volume (Liters)	Nat. kW Input	LP kW Input	First Hour Rating (Liters)	Uniform Energy Factor	Recovery 50°C Rise* Nat. Liters/ Hour	Recovery 50°C Rise* LP Liters/ Hour	A Floor to Flue Conn. mm.	B Jacket Dia. mm.	C Vent Size mm.	D Floor to T&P Conn. mm.	E Floor to Gas Conn. mm.	F Floor to Water Conn. mm.	G Floor to Top of Heater mm.	H Depth mm.	Approx. Shipping Weight kg.
RG130T6N•	114	106	7.9	7.9	201	0.60	110	110	1522	406	76x102	1264 / 1432	322	1449	1432	495	49
RG230T6N•	114	106	9.4	9.1	223	0.61	129	125	1522	457	76x102	1267 / 1432	322	1449	1432	546	53
RG230S6N	114	106	8.8	9.4	216	0.60	121	121	1251	508	76x102	982	322	1181	1160	597	51
RG140T6N•	151	144	10.0	9.9	261	0.59	139	139	1562	457	76x102	1308 / 1524	322	1505	1472	546	60
RG240T6N•	151	144	11.7	10.6	280	0.59	183	129	1532	508	76x102	1273 / 1438	322	1462	1441	597	61
RG240S6N•	151	144	11.7	10.3	276	0.59	163	155	1314	559	76x102	1041 / 1200	322	1249	1224	648	63
RG150T6N•	189	178	10.0	9.9	303	0.63	139	139	1532	508	76x102	1270 / 1432	322	1464	1441	597	68
RG250T6N•	189	182	11.7	10.3	326	0.65	163	155	1532	559	76x102	1267 / 1448	322	1470	1441	648	77
RG250L6N	182	178	11.7	10.3	322	0.63	163	155	1316	610	76x102	1032	322	1254	1224	699	70
RG250S6N•	189	178	14.7	14.1	337	0.63	204	197	1540	559	102	1267 / 1448	322	1464	1441	648	76

Propane models feature a Titanium Stainless Steel propane burner. For Propane (LP) models change suffix "N" to "X".

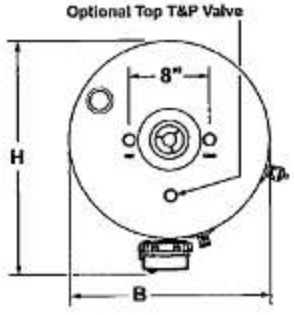
For 10 year models, change suffix from "6" to "10".

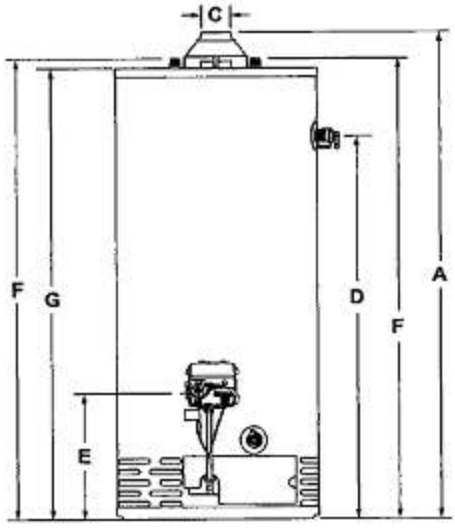
*Based on manufacturer's rated recovery efficiency.

•Models feature optional top T&P location and must be specified when ordering.

Note: RG230S6N and RG250L6N do not have top T&P option.

Uniform Energy Factor and First Hour Rating is based on the latest AHRI directory listings.





General:

Meets NAECA Requirements.

All gas water heaters are certified at 300 PSI test pressure (2068 kPa) and 150 PSI working pressure (1034 kPa). All water connections are ¾" NPT (19mm) on 8" (203mm) centers. All gas connections are ½" (13mm).

All models design-certified by CSA International (formerly AGA/CGA), ANSI standard Z-21.10.1 and peak performance rated.

Dimensions and specifications subject to change without notice in accordance with our policy of continuous product improvement.

Suitable for Water (Potable) Heating and Space Heating.

Toxic chemicals, such as those used for boiler treatment, shall NEVER be introduced into this system. This unit may NEVER be connected to any existing heating system or component(s) previously used with a non-potable water heating appliance.

BRADFORD WHITE
WATER HEATERS

Ambler, PA

For U.S. and Canada field service, contact your professional installer or local Bradford White sales representative.

Sales **800-523-2931** • Fax **215-641-1670** / Technical Support **800-334-3393** • Fax **269-795-1089** • Warranty **800-531-2111** • Fax **269-795-1089**

International: Telephone **215-641-9400** • Telefax **215-641-9750** / **www.bradfordwhite.com**

BRADFORD WHITE-CANADA" INC. Sales / Technical Support **866-690-0961** / **905-238-0100** • Fax **905-238-0105** / **www.bradfordwhite.com**

Built to be the Best™

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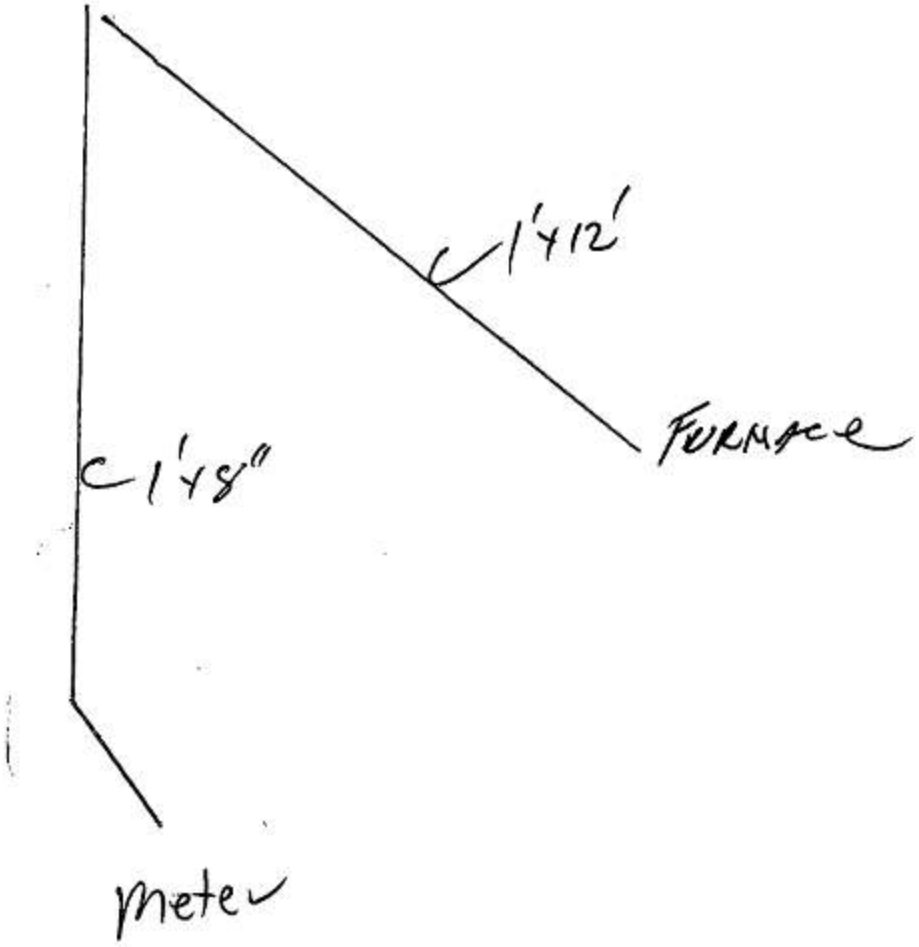
506 Nebraska Brick
Total BTU 88,000
Total piping 201



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PLUMBING
SEP 14 2020
APPROVED

RESIDENTIAL REPLACMENT OF FURNACE/BOILER

(IN LIEU OF MANUAL S)

BOILER REPLACEMENT

OLD BTU INPUT_____OUTPUT_____= B=R OUTPUT_____

NEW BTU INPUT_____OUTPUT_____ OUTPUT_____

FURNACE REPLACEMENT

OLD BTU INPUT 70,000 OUTPUT 56,000 BTU

NEW BTU INPUT 88 OUTPUT 72000 out

A/C REPLACEMENT

OLD UNIT_____BTU

NEW UNIT_____BTU

AND/OR

HEAT LOSS/HEAT GAIN

IF YOU DON'T HAVE OLD UNIT SPECIFICATIONS, YOU WILL HAVE TO SUBMIT A HEAT LOSS/HEAT GAIN (MANUAL J & MANUAL S)

IF THE NEW UNIT BTU IS LESS THAN THE OLD UNIT BTU YOU WILL HAVE TO SUBMIT A HEAT LOSS/HEAT GAIN

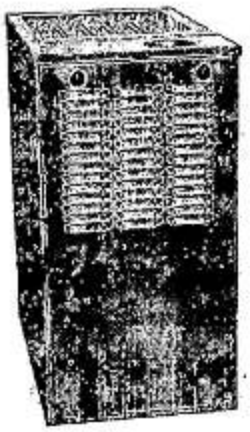
WE ALSO WILL NEED

COPY OF THE BROCHURE/SPECS OF THE NEW FURNACE/BOILER/AC UNIT (NOT THE INSTALLATION GUIDE)

CHIMNEY CERTIFICATION (CANNOT BE CERTIFIED BY HOMEOWNER)

N80ESN/N80ESL
Input Capacities: 45,000 thru
Single-Stage Multi-Speed ECM
Non-Condensing Gas Furnaces

Product Specifications



A200116

Use of the AHRI Certified TM Mark indicates a manufacturer's participation in the program. For verification of certification for individual products, go to www.ahridirectory.org .

ISO 9001 Quality

A200115

LIMITED WARRANTY*

- 20 year heat exchanger limited warranty
- 5 year parts limited warranty

- With timely registration, an addition 5 year parts limited warranty

* For residential applications only, see warranty certificate for complete details and restrictions, including warranty coverage of other applications

EASIER TO SELL

- 80% AFUE
- Flame roll-out sensors standard
- Category I venting
- Blocked vent switch
- Louvered door
- 24 VAC and 115 VAC humidifier terminal
- Electronic air cleaner terminal
- Select sizes approved for twinning, refer to accessory kit listing
- N80ESL - Low NOx units are designed for California installations and can be installed in air quality management districts with a 40ng/J NOx emissions limit
- Cabinet air leakage less than 2.0% at 1.0 in. W.C. and cabinet air leakage less than 1.4% at 0.5 in. W.C. when tested in accordance with ASHRAE standard 193

TOUGHER

- Adjustable heating blower OFF delay
- Factory set blower ON delay
- RPJ aluminized steel heat exchanger
- High temperature limit control designed to prevent overheating
- Direct ignition with Silicon Nitride igniter
- One piece prepainted steel cabinet

QUIETER

- In-shot burners

EASIER TO INSTALL AND SERVICE

- 33 1/3" (847mm) high, for ease of installation
- Quarter turn knobs for easy door removal and secure attachment
- Factory shipped for natural gas, convertible to propane with accessory kit
- Four position - upflow/downflow/horizontal (left/right) installation
- Three position inducer elbow capability
- Through the casing flue pipe for counterflow applications
- Common venting with other Category I appliances
- Masonry chimney adapter available
- Self diagnostics
- Slide out blower assembly

Model N80ESN/L	Input (BTUH)	Efficiency AFUE	Cooling Capacity CFM range	Dimensions H x W x D Inches (Millimeters)	Shipping Wt. Lbs(Kg)
0451412	44,000	80%	415- 1080	33-1/3 x 14-3/16 x 29 (847 x 360 x 737)	104 (47)
0451712	44,000	80%	320- 1215	33-1/3 x 17-1/2 x 29 (847 x 445 x 737)	119 (54)
0701412	66,000	80%	315- 1070	33-1/3 x 14-3/16 x 29 (847 x 360 x 737)	114 (52)
0701712	66,000	80%	385- 1005	33-1/3 x 17-1/2 x 29 (847 x 445 x 737)	120 (54)
0701716	66,000	80%	915- 1515	33-1/3 x 17-1/2 x 29 (847 x 445 x 737)	126 (57)
0702116	66,000	80%	775- 1545	33-1/3 x 21 x 29 (847 x 533 x 737)	142 (64)
0901714	88,000	80%	750- 1210	33-1/3 x 17-1/2 x 29 (847 x 445 x 737)	131 (49)
0902116	88,000	80%	845- 1445	33-1/3 x 21 x 29 (847 x 533 x 737)	137 (62)
0902120	88,000	80%	915- 1980	33-1/3 x 21 x 29 (847 x 533 x 737)	140 (64)
0902420	88,000	80%	845- 1960	33-1/3 x 24-1/2 x 29 (847 x 622 x 737)	146 (66)
1102120	110,000	80%	990- 1715	33-1/3 x 21 x 29 (847 x 533 x 737)	146 (66)
1102420	110,000	80%	820- 2005	33-1/3 x 24-1/2 x 29 (847 x 622 x 737)	161 (73)
1352420	132,000	80%	1025- 1810	33-1/3 x 24-1/2 x 29 (847 x 622 x 737)	167 (76)
1552420	154,000	80%	835- 1965	33-1/3 x 24-1/2 x 29 (847 x 622 x 737)	168 (76)

Furnace

SPECIFICATIONS (continued)

Unit Size		0902116	0902120	0902420	1102120	1102420	1352420	1552420
RATINGS AND PERFORMANCE								
Input Btuh* Nonweatherized ICS	All Standard All Low NOx Upflow	88,000	88,000	88,000	110,000	110,000	132,000	154,000
	All Low NOx Downflow/Horizontal	84,000	84,000	84,000	105,000	105,000	126,000	147,000
Output Capacity (Btuh)† Nonweatherized ICS	All Standard All Low NOx Upflow	72,000	71,000	72,000	90,000	90,000	107,000	125,000
	All Low NOx Downflow/Horizontal	68,000	68,000	69,000	85,000	86,000	102,000	119,000
AFUE†		80%						
Certified Temperature Rise Range °F (°C)		35-65 (19-36)	25-55 (14-30)	30-60 (17-33)	30-60 (17-33)	30-60 (17-33)	40-70 (22-39)	45-75 (25-41)
Certified External Static Pressure	Heat/Cool	0.15/0.50	0.15/0.50	0.15/0.50	0.20/0.50	0.20/0.80	0.20/0.50	0.20/0.50
Airflow CFM‡	Heating	1418	1650	1565	1890	1930	1760	195
	Cooling	1445	1980	1960	2040	2005	1810	1965
Electrical								
Unit Volts-Hertz-Phase		115-60-1						
Operating Voltage Range	Min-Max	104-127						
Maximum Unit Amps		8.3	13	10.3	13.4	10.7	10.7	10.7
Unit Ampacity		11	16.90	13.50	17.40	14	14	14
Maximum Wire Length (Measure 1 Way in Ft (M))		33 (10.1)	34 (10.4)	27 (8.2)	33 (10.1)	26 (7.9)	26 (7.9)	26 (7.9)
Minimum Wire Size		14	12	14	12	14	14	14
Maximum Fuse or Ckt Bkr Size (Amps)**		15	20	15	20	15	15	15
Transformer (24v)		40va						
External Control Power Available	Heating	12va						
	Cooling	35va						
Air Conditioning Blower Relay		Standard						
CONTROLS								
Heating Blower Control		SolidState Time Operation						
Burners (Monoport)		4	4	4	5	5	6	7
Gas Connection Size		1/2In. NPT						
GAS CONTROLS								
Gas Valve (Redundant)	Mfr.	WhiteRodgers						
	Min. inlet pressure (In. W.C.)	4.5 (Natural Gas)						
	Max. inlet pressure (In. W.C.)	13.6 (Natural Gas)						
Ignition Device		Hot Surface						
Factory installed orifice		Size 43						
BLOWER DATA								
Direct Drive Motor HP		1/2	1	3/4	1	3/4	3/4	3/4
Motor Full Load Amps		6.80	11.50	8.80	11.50	8.80	8.80	8.80
RPM (Nominal)Speeds		1050-5	1050-5	1050-5	1050-5	1050-5	1050-5	1050-5
Blower Wheel Diameter x Width - In. (mm)		10 x 10 (254 x 254)	11 x 11 (279 x 279)	11 x 11 (279 x 279)	11 x 11 (279 x 279)	11 x 11 (279 x 279)	11 x 11 (279 x 279)	11 x 11 (279 x 279)

*. Gas input ratings are certified for elevations to 2000 ft. (610 M). In USA, for elevations above 2000 ft. (610 M), reduce ratings 4 percent for each 1000 ft. (305 M) above sea level. Refer to National Fuel Gas Code NFPA 54/ANSI Z223.1 Table F.4 or furnace installation instructions.

†. Capacity in accordance with U.S. Government DOE test procedures.

‡. Airflow shown is for bottom only return-air supply for the as-shipped speed tap. For air delivery above 1800 CFM, see Air Delivery table for other options. A filter is required for each return-air supply. An airflow reduction of up to 7 percent may occur when using the factory-specified 4-5/16-in. (110 mm) wide, high efficiency media filter..

**. Time-delay type is recommended.

ICS = Isolated Combustion System

Manufacturer reserves the right to change, at any time, specifications and designs without notice and without obligations.

CHIMNEY VERIFICATION FOR REPLACEMENT OF FUEL-FIRED EQUIPMENT

BLOCK 1399-24 LOT 95 QUALIFICATION CODE _____ PERMIT # _____

WORK SITE ADDRESS 506 Nebraska

Owner in Fee Roberts

Verifying Individual Edward Brown Company Elite Heating & Cooling

Address 1584 Mt Everest Lane (Street) Toms River (City) (State) (Zip Code)

Tel: ([redacted] Fax: (___) _____

Check the Appropriate Box(es):

Type of Replacement:

- [ ] Oil to Gas Conversion
- [ ] Gas to Oil Conversion
- [ ] Gas Appliance Replacement
- [ ] Oil to Oil Replacement
- [ ] Other _____

Existing Vent/Chimney: Size 5"

- [ ] "B" Label Vent
- [ ] "L" Label Vent
- [ ] Flexible Liner
- [ ] Power Vent/Exhauster

- [ ] Chimney-Interior
- [ ] Chimney-Exterior
- [ ] Masonry Chimney-Tile Lined
- [ ] Masonry Chimney-Unlined
- [ ] Other _____

	Type	Fuel Type	BTU Rating (input/hour)
Appliance 1:	Furnace	Oil / (Gas) / Other:	88000
Appliance 2:		Oil / Gas / Other:	
Appliance 3:		Oil / Gas / Other:	

CHIMNEY LINER

If a chimney liner is being installed, all documentation on the liner must accompany the Permit application.

Manufacturer: _____ Model: _____ UL Listing: _____

Material of Liner: Stainless Steel _____ Aluminum _____

Size of Appliance Vent: _____ Size of Liner: _____ Height of Chimney: _____

Length of Connector: _____ Vent Connector Rise: _____

How does the appliance vent? [ ] Natural Draft [ ] Fan-assisted [ ] Other: _____

PLEASE SIGN ONE OF THE FOLLOWING VERIFICATION STATEMENTS

For Oil or Coal to Gas Conversions:

I have verified that the chimney/vent is in good repair and clear of obstruction and is substantially clean of residue from its previous use serving an oil or coal appliance. I have verified that the chimney/vent is appropriately lined and sized for the appliance(s) being installed.

Edward Brown 8/27/20
Signature Date

Oil to Oil or Gas to Gas Replacements or New/Additional Appliances:

I have verified that the existing chimney/vent is in good repair and clear of obstruction. I have verified that the existing chimney/vent is appropriately lined and sized for the appliance(s) being installed and/or remaining.

_____
Signature Date

Direct Vent Appliance:

I hereby verify that the appliance(s) being installed is a direct vent appliance. I further verify that the existing chimney/vent is appropriately lined and sized for any remaining appliances.

_____
Signature Date

Verification Not Submitted:

I choose not to submit verification. I understand that I will be required to be present for the inspection to remove and reinstall the chimney vent connector.

_____
Signature Date

FOR MINOR AND EMERGENCY WORK, THIS FORM MUST BE PROVIDED WITH YOUR PERMIT APPLICATION. FOR ALL OTHER WORK, THIS FORM MUST BE PRESENTED TO THE CODE OFFICIAL PRIOR TO FINAL INSPECTION.

All applicable information requested on this form must be supplied.
This form may not be submitted by a homeowner in lieu of the required inspection.

U.C.C. F370 (rev. 01/12)

506 Nebraska Brick

Total BTU 88,000

Total piping 20'