BLOCK 1326.03 LOT 64 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 13-2490

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII C-12-003764

I. IDENTIFICATION

1. Proposed Work Site at: 167 Riviera Dr.
2. Name of Owner: Dave E. Ilves
   Tel. [redacted] e-mail _____
   Address 167 Riviera Dr. (street) (municipality) (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: Neil Sterling PHH Tel. ( ) 223-8320
   Address 109 Taylor Ave 59 e-mail _____
   License No. OR, if new home, Builder Reg. No. 9227 Exp. Date 06/13
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. 75 309 3037 FAX: ( ) 223-4960
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. ( ) _____ FAX: ( ) _____
6. Responsible Person in Charge once Work has Begun NEIL ✓
   Tel. ( ) 223-8320 FAX: ( ) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical			
3. Plumbing		60	
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee		3	
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$	63	

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. Max. Live Load	
7. Max. Occupancy Load	
8. If Industrialized Building: State Approved ____ HUD ____	
9. Total Land Area Disturbed sq. ft.	
10. Flood Hazard Zone	
11. Base Flood Elevation ft.	
12. Wetlands yes ____ no ____	

IIa. PROPOSED WORK

- ☐ Minor Work
- ☐ New Building
- ☐ Addition
- ☐ Demolition
- ☐ Repair
- ☐ Alteration
- ☐ Renovation
- ☐ Reconstruction
- ☐ Asbestos Abat. -Subch. 8
- ☐ Lead Hazard Abatement
- ☐ Radon Remediation
- ☐ Annual Permit

IIb. SUBCODES (Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building		CR	10/10/12						
☐ Electrical									
☐ Plumbing				10/15/12	10-16-12 PH				
☐ Fire Protection									
☐ Elevator									
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change In Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   Gained, Sale ____ ____
   Gained, Rental ____ ____
   Lost, Sale ____ ____
   Lost, Rental ____ ____

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change In Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)

DO YOU WANT:
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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 7/22/2013
Control Number C-12-003764
Permit Number 13-2490
Permit Issue Date 6/12/2013
Certificate Number 13-2490

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 167 RIVIERA DR Brick Township, NJ Block: 1326.03 Lot: 64 Qual:

Owner in Fee: FETTERER, DAVID & STEPHANIE

Owner Address: 167 RIVIERA DR BRICK NJ 08724

Telephone:

Contractor NEIL SLATTERY P & H LLC

Address 109 TAYLOR AVE MANASQUAN NJ 08736-

Telephone: (732) 223-8320 Fax:

License Number or Builders Registration Number: 9227 Federal Emp. Number: 25-3093037

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: HOT WATER HEATER

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:

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 7/22/2013

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

CONSTRUCTION PERMIT

Date Issued 6/12/13
Control # C-12-003764
Permit # 13290

IDENTIFICATION Block: 1326.03 Lot: 64 Qualifier
Work Site Location: 167 RIVIERA DR Brick Township, NJ

Owner in Fee: FETTERER, DAVID & STEPHANIE
167 RIVIERA DR BRICK NJ 08724

Telephone:

Contractor: NEIL SLATTERY P & H LLC
Address: 109 TAYLOR AVE MANASQUAN NJ 08736-

Telephone: (732) 223-8320
Lic. No. or Bldrs. Reg. No. 9227
Federal Employee. No. 25-3093037

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:
HOT WATER HEATER

Note: If constuction 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 $1,600

Construction Official

Date 10-8-12

PAYMENTS (Office Use Only)	
Building	$0
Electrical	$0
Plumbing	$60
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$3
CO Fee	
Other	$0
Total	$63
Check No.	
Cash	$0
Credit	$0
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.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control # 6/12/13

Date Issued
Permit # 13.2490

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

Block 1326.03 Lot 64 Qualification Code

Work Site Location 167 Riviera Dr.

Owner in Fee: Dave Fotherer

Tel. [redacted] e-mail

Address 167 Riviera Dr Brick
street municipality zip code

Contractor: NEIL SLATTERY PLUMBING Tel. (732) 223-8320

Address 109 TAYLOR AVE e-mail

MANASQUAN, NJ 08736

Contractor License No. 9227 Exp. Date 06/13

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH02660600

Federal Emp. ID No. 753093037 FAX: (732) 223-4960

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 1600

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: 10-18-12 Approved by: PA
[ ] Plumbing Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 10-18-12
Approved by: PA

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 07.19.13
Approved by: PA

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO Final	6-26-13		7-16-13	

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

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Replace Power Vent HWH

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Other	

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

CHIMNEY VERIFICATION FOR REPLACEMENT OF FUEL-FIRED EQUIPMENT

BLOCK 1326.03 LOT 64 QUALIFICATION CODE _____ PERMIT # _____

WORK SITE ADDRESS 167 Riviera Dr.

Owner in Fee Dave Fetherer

Verifying Individual Neil Stetting Company NS PM, LLC

Address 167 Riviera Dr. Buck

Street City State Zip Code

Tel: (703) 581-2230 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:

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

Size _____

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

	Type	Fuel Type	BTU Rating (input/hour)
Appliance 1:	_____	Oil / Gas / Other: _____	_____
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.

_____
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] 10/10/12
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.

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.

Faxed 10/15/12

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

Date: Monday, October 15, 2012

To: FETTERER, DAVID & STEPHANIE
167 RIVIERA DR
BRICK, NJ 08724

RE: Plumbing Subcode
Block: 1326.03 Lot: 64 Qual:
167 RIVIERA DR
Permit Number: Control Number: C-12-003764
Last Submit Date: Thursday, October 11, 2012

Dear FETTERER, DAVID & STEPHANIE,

The following comments were made during the Plan Review process:
1- Product specification sheet required for hwh.

Sincerely,

Mark Hibbard, Subcode Official

CC:

Resubmit
Plumbing
10-17-12
CR

BRADFORD WHITE®
WATER HEATERS

TTW1

Residential Power Vent Energy Saver Gas Water Heater

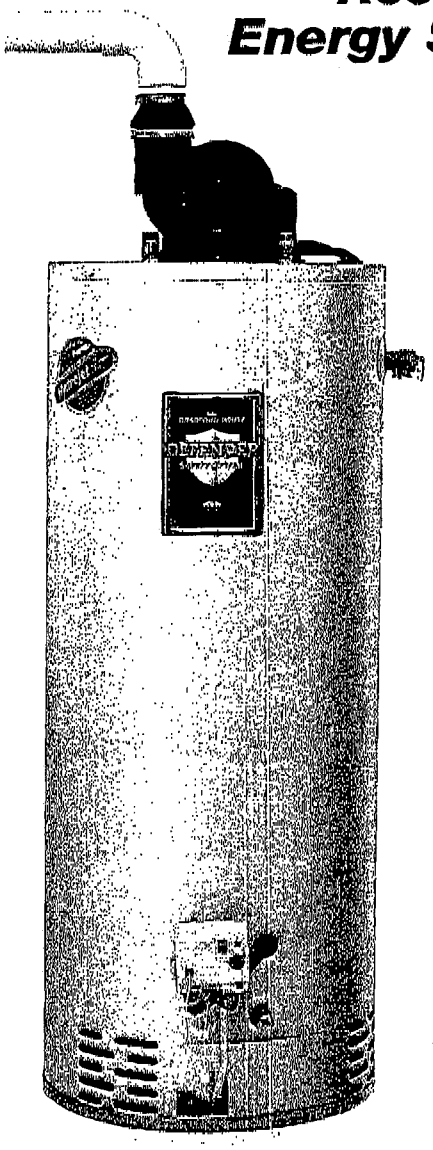


Photo is of
M-1-TW-40S6FBN

The TTW®1 FVIR Defender Safety System® Models Feature:

- **Power Vented Water Heater**—Designed for installations where atmospheric units cannot be used. Exhaust gases are vented under positive pressure directly out of the building through the roof or the wall.
- **Advanced ScreenLok® Technology Flame Arrestor Design**—Flame arrestor is designed to prevent ignition of flammable vapor outside of the water heater.
- **Flammable Vapor Sensor**—Electronic sensor prevents burner operation if flammable vapors are detected. The sensor will also prevent operation if there is ongoing flammable vapor burn inside the combustion chamber.
- **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**—Cold water inlet sediment reducing device helps prevent sediment build up in tank. This increases first hour delivery, while minimizing temperature build up at top of tank.
- **Vitraglas® Lining**—Bradford White tanks are lined with 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).
- **Powerful Blower Motor**—Our significantly quiet design has greater resistance to outside winds and the power to vent in many difficult venting situations.
- **Honeywell Self Diagnostic Electronic Gas Control** —Intelligent gas control with spark to pilot ignition system eliminates the constant burning pilot. This results in savings of pilot gas during stand by periods (120 V.A.C.).
  - **Enhanced Performance**—Proprietary algorithms provide enhanced First Hour Delivery ratings and tighter temperature differentials.
  - **Advanced Temperature Control System**—Microprocessor constantly monitors and controls burner operation to maintain accurate and consistent 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.
- **Compatible With Optional Accessory Packages**—Performance Package, Protection Package and Inlet Shut-Off Valve.
- **Horizontal and Vertical Venting**—With 2" or 3" PVC, ABS or CPVC (Maximum equivalent vent length on reverse side).
- **1" Non-CFC Foam Insulation**—Covers the sides and top, reducing the amount of heat loss. This results in less energy consumption, improved operation efficiencies and jacket rigidity.
- **Water Connections**—3/4"NPT factory installed true dielectric fittings.
- **Factory installed Heat Traps**—Design incorporates a flexible disk that reduces heat loss in piping and eliminates the potential for noise generation.
- **Protective Magnesium Rod.**
- **Pedestal Base.**
- **T&P Relief Valve**—Included.
- **Low Restriction Brass Drain Valve**—Durable tamper proof design.

FEATURING:

DEFENDER SAFETY SYSTEM®

Hydrojet®

AHRI

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.

Residential Power Vent Water Heater

TTW®1 Energy Saver Models

NATURAL GAS AND LIQUID PROPANE GAS

Meet or exceed ASHRAE 90.1b (current standard) C.E.C. Listed
80% Recovery Efficiency

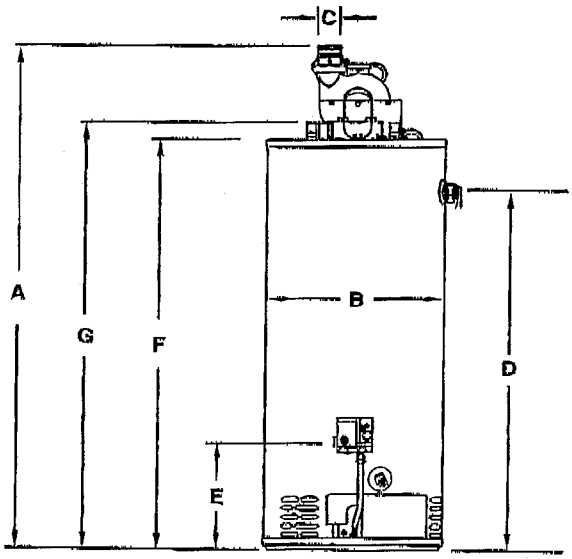
Model Number	Capacity U.S. Gal.	Capacity Imp. Gal.	Nat. BTU/Hr. Input	LP BTU/Hr. Input	Recovery 90°F Rise* Nat. U.S. GPH	Nat. Imp. GPH	LP U.S. GPH	LP Imp. GPH	A Floor to Vent Conn. in.	B Jacket Dia. in.	C Vent Size in.	D Floor to T&P Conn. in.	E Floor to Gas Conn. in.	F Floor to Top of Heater in.	G Floor to Water Conn. in.	H Depth in.	Approx. Shipping Weight lbs.
M-1-TW-40S6FBN	40	33	40,000	38,000	43	36	41	34	56½	20	2	40½	11¾	46¾	46	24¾	135
M-1-TW-50S6FBN	50	42	40,000	38,000	43	36	41	34	57¾	22	2	40¾	11¾	47¾	49¾	26¾	160
M-1-TW-60T6FBN	60	51	42,000	40,000	45	38	43	36	68	22	2	50¾	11¾	57¾	58½	27¼	193

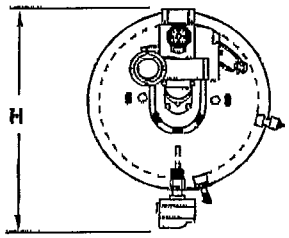
Model Number	Capacity Liters	Nat. kW Input	LP kW Input	Recovery 50°C Rise* Nat. Liters/ Hour	LP Liters/ Hour	A Floor to Vent Conn. mm.	B Jacket Dia. mm.	C Vent Size mm.	D Floor to T&P Conn. mm.	E Floor to Gas Conn. mm.	F Floor to Top of Heater mm.	G Floor to Water Conn. mm.	H Depth mm.	Approx. Shipping Weight kg.
M-1-TW-40S6FBN	151	11.7	11.0	163	155	1435	508	51	1030	298	1175	1220	632	75
M-1-TW-50S6FBN	190	11.7	11.0	163	155	1457	560	51	1038	298	1197	1251	679	84
M-1-TW-60T6FBN	227	12.3	11.7	170	163	1727	560	51	1292	298	1467	1486	692	88

Propane models feature a Titanium Stainless Steel propane burner. For Propane (LP) models change suffix "BN" to "SX"
For 10 year models, change suffix from "6" to "10".

*Based on manufacturer's rated recovery efficiency.

110 V.A.C. Required for Power Venting / 110 V.A.C., 60HZ, 3.1 Amperes





M-1-TW40 M-1-TW50 M-1-TW60		2" Vent Pipe	3" Vent Pipe
Max. Equivalent Length		†50 ft.	†120 ft.
Min. Equivalent Length		7 ft.	15 ft.
Number	1	45 ft.	115 ft.
of	2	40 ft.	110 ft.
90° Elbows	3	35 ft.	105 ft.

†For high altitude installations, consult the installation instructions.

General

All gas water heaters are certified at 300 PSI (2068 kPa) test pressure and 150 PSI (1034 kPa) working pressure.
All water connections are 3/4" NPT (19mm) on 8" (203mm) centers. All gas connections are 1/2" (13mm).
All models design certified by CSA International (formerly AGA/CGA), ANSI 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 866-690-0981 / 905-238-0100 • Fax 905-238-0105 / www.bradfordwhite.com

Built to be the Best™

ATT : WAYNE fax(732) 262-2941

Advance Auto Parts Professional

Service is our best part.

Store 6529 3105 Route 88 Point Pleasant Beach, NJ 08742 Phone: (732) 295-1547
Questions or feedback? Contact the Commercial Customer Support Team at 1-877-280-5965 or email us at service@advanceautoparts.com

Eric Ratajczak
323 Seminole Ln

Brick, NJ 08724
Phone: (732) 496-6187
Account ID: 6529034161

P.O. #:
Date: 10/16/12
Register: 3
Store/Unit#:
Internet Order #:

Invoice/Trans: 6529229039929
Time: 2:54:17PM
Delivery: No
Salesperson: Elaine

Product Line	Part #	Description	SKU	Warranty	Qty	List	Cost	Extended
Remy New	91324	ALTERNATOR 1 EA RMYNW	3170005	LIMITED LIFETIME REPLACEMENT	1	170.48	109.99	109.99
Remy New	91324	CORE ALTERNATOR 1 EA RI	99990734		1		12.00	12.00
Returns								
Wearever Platinum	PNAD785	BRAKE PADS 1 EA WPLAT	10145798	LIMITED LIFETIME REPLACEMENT	-1	87.48	49.99	-49.99
Orig Invoice/Trans 6529210845664 - Price 49.99 - Store 06529 - Date 4/17/2012 - TM 405564 - P.O.#: 00								
Remy New	91324	CORE ALTERNATOR 1 EA RI	99990734		-1		12.00	-12.00
Tender								
		Check						-64.20

Motor Vehicle Commission NEW JERSEY
CHIEF ADMINISTRATOR MOTOR VEHICLE COMMISSION

VEHICLE REGISTRATION

PLATE NO: XN442X GOOD THRU: 05/2013
VIN: 1GBHG31U131161655
CHE 2003 VAN WHT GW: 5000 AX:2
COMMERCIAL 11
ERIC RATAJCZAK DL:R0784 23200 03704
323 SEMINOLE LANE RENEWAL PT:CM
BRICK NJ 08724
EQ: 5000 FEE: 105.00 RF LK20121220579

D2KLJ1D4RX1JRD1CD6

SUBTOTAL		60.00
T1 Tax @	7.0000%	4.20
TOTAL INVOICE		**64.20**
PAYMENT		Check
CHANGE		0.00

Customer's signature below certifies that the tax free purchase items qualify for resale or other permitted tax or fee exemption. Customer will pay all taxes and government fees on taxable purchases, including interest and penalties if applicable. All cores need to be in the original box and in rebuildable condition to receive full core credit. Invoice required as proof of purchase for all returns.

THANK YOU FOR YOUR BUSINESS!

Customer Copy

Eric Ratajczak Framing
732-903-6944
p.1

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. ( ) I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. ( ) I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(f)1.ix:

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

D. ( ) I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment.

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

(X) Check if contractor.

Agent Name Mid Jersey Prof, LLC

Address 109 Taylor Ave
Manalapan

Telephone ( ) 223-8320

Signature

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:17.

6-26-13 MR

(1) - CONDENSATE FOR [illegible]

(2) - STRAP - ON EXHAUST

(3) - EXHAUST - NOT 12" ABOVE [illegible]
OR 4' FROM.

(P) Tech Back