



Date Received	10/10/2002
Date Issued	10/10/2002
Control #	52978
Permit #	020918

Block 128.05 Lot 23 Qualification Code _____
 Work Site Location: 23 THREADLEAF TERRACE FINISHED BASEMENT , NJ

Owner in Fee: MARTIN, ROBERT J & HEATHER J

Address 23 THREADLEAF TERRACE BURLINGTON NJ 08016-

_____ Email _____

Tel. 609/2396864

Contractor: GIBSON ELECTRICAL CONTRACTORS

Address 31 GLEN BURNIE DRIVE ERIAL NJ 08081-

_____ Email _____

Tel. 856/3463388 Fax. 856/3463308

Lic No. 14718 Exp. Date _____

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

Federal Employee No. 22-3768327

Use Group Present _____ Proposed R-3

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as _____ Utility Co. _____

Estimated Cost of Electrical Work **\$1,684**

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)			
☐ No Plan Required				Type:	Failure	Failure	Approval	Initial	
☐ Partial/Underslab Approved				Rough	_____	_____	_____	_____	
☐ Partial Underslab Utilities Approved				Barrier-Free	_____	_____	_____	_____	
Date: _____ by: _____				Trench	_____	_____	_____	_____	
☐ Electrical Plans Approved				Temp. Serv.	_____	_____	_____	_____	
Date: _____ by: _____				Constr. Serv.	_____	_____	_____	_____	
☐ Joint Plan Review Required				TCO	_____	_____	_____	_____	
☐ Building	☐ Plumbing			Other	_____	_____	_____	_____	
☐ Fire	☐ Elevator			Service	_____	_____	_____	_____	
SUBCODE APPROVAL for PERMIT				Final	_____	_____	_____	_____	
Date: _____				Barrier-Free	_____	_____	_____	_____	
Approved by: _____				Temp. Cut-in-Card Date Issued	_____				
SUBCODE APPROVAL for CERTIFICATE				Final Cut-in-Card Date Issued	_____				
☐ CO	☐ CCO	☐ CA		Annual Pool Inspection	_____	_____	_____	_____	
Date: _____				Date of Grounding and Bonding Certification	_____				
Approved by: _____									

U.C.C F120 (rev. 11/09)

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

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

☐ Licensed Elec Contr' ☐ Certif'd Landscape Irrigation Contr' ☐ Exempt Applicant

B. TECHNICAL SITE DATA		
DESCRIPTION OF WORK		
FINISHED BASEMENT	FINISHED BASEMENT	FINISHED BASEMENT

QTY.	SIZE	ITEMS	FEE (Office Use Only)
<u>1</u>		Lighting Fixtures	
<u>10</u>		Receptacles	
<u>2</u>		Switches	
<u>3</u>		Detectors	
		Light Poles	
<u>1</u>		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
<u>17</u>		TOTAL NUMBERS	<u>\$35</u>
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge	
Minimum Fee	
State Permit Surcharge Fee	\$4
TOTAL FEE	\$39



ELECTRICAL SUBCODE
TECHNICAL SECTION



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Permit # 020918

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

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Contractor: GIBSON ELECTRICAL CONTRACTORS
Address 31 GLEN BURNIE DRIVE ERIAL NJ 08081-
Email
Tel. 856/3463388 Fax. 856/3463308
Lic No. 14718 Exp. Date
Home improvment Contractor Registration No. or Exemption Reason(is applicable):
Federal Employee No. 22-3768327

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed R-3
Pole/Pad # Temporary Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work \$1,684

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)			
☐ No Plan Required			Type:	Failure	Failure	Approval	Initial
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☐ Partial Underslab Utilities Approved			Barrier-Free				
Date: by:			Trench				
☐ Electrical Plans Approved			Temp. Serv.				
Date: by:			Constr. Serv.				
Joint Plan Review Required			TCO				
☐ Building ☐ Plumbing			Other				
☐ Fire ☐ Elevator			Service				
SUBCODE APPROVAL for PERMIT			Final				
Date: Approved by:			Barrier-Free				
SUBCODE APPROVAL for CERTIFICATE			Temp. Cut-in-Card Date Issued				
☐ CO ☐ CCO ☐ CA			Final Cut-in-Card Date Issued				
Date: Approved by:			Annual Pool Inspection				
			Date of Grounding and Bonding Certification				

U.C.C F120 (rev. 11/09)

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C. CERTIFICATION IN LIEU OF OATH

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Applicant's Signature/Contractor's Seal and Signature and Printed Name
☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

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		Communication Points			
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<u>17</u>		TOTAL NUMBERS			<u>\$35</u>
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Administrative Surcharge					
Minimum Fee					
State Permit Surcharge Fee					<u>\$4</u>
TOTAL FEE					<u>\$39</u>

Construction Code
plus three photocopies.