

Brick Township

18-2208



CONSTRUCTION PERMIT APPLICATION 0186671

C-18-002663

1. IDENTIFICATION
1. Proposed Work Site at: **730 Old Burnt Tavern Road, Brick, NJ**

2. Name of Owner in Fee: **McMickle, Dennis-**
[Redacted] e-mail: [Redacted]

Address **730 Old Burnt Tavern** **Brick** **08724**
street municipality zip code

3. Ownership in Fee: Public _____ Private ☒ _____

4. Principal Contractor: **Trinity Solar** Tel. **(848) 220-9040**
Address **2211 Allenwood Rd.** e-mail _____
Wall, NJ 07719 email: **applications.nj@trinitysolarsystems.com**

License No. OR, if new home, Builder Reg. No. **13VH01244300** Exp. Date **3-31-19**

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. **223292324** FAX: **(848) 220-9139**

5. Architect or Engineer _____ Contact _____
Address _____ e-mail _____
Tel. _____ FAX: _____

6. Responsible Person in Charge once Work has Begun **Charles Bonicker/Danielle DeVito**
Tel. **(732) 780-3779 ext. 9040** FAX: **(848) 220-9139**

1.	Building	\$	150 ✓
2.	Electrical		275 ✓
3.	Plumbing		
4.	Fire Protection		
5.	Elevator Devices		
6.	Subtotal		
7.	Less 20% for State Plan Review	\$	
8.	Subtotal	\$	
9.	State Permit Surcharge Fee		
10.	Subtotal	2 \$	325 ✓
11.	Cert. of Occupancy		
12.	Other		
13.	TOTAL	\$	533 ✓

5.1 kw

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 ☐

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

(Check all that apply)

- ☒ Building
- ☒ Electrical
- ☐ Plumbing
- ☐ Fire Protection
- ☐ Elevator

FOR OFFICE USE ONLY (Optional)							
Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval Rejection	
1,214	CW	7/13/18		8-9-18	JS		
17,340				7/31/18	PK		
0							
	Eng	Exempt		7/24/18	EEC		
17340							

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 | _____ | _____ |

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

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

1. ☐ Partial Releases
2. ☐ Prototype Processing

- | | | | |
|---|---|---|---|
| 1. ☐ Elevators/Escalators/Lifts/
Dumbwaiters/Moving Walks | 4. ☐ Refrigeration Systems | 8. ☐ Smoke Control Systems in Open Wells | 12. ☐ Fire Alarm |
| 2. ☐ High Pressure Boilers | 5. ☐ Cross-Connections/Backflow Preventers | 9. ☐ Underground Storage Tanks | |
| 3. ☐ Pressure Vessels | 6. ☐ Hazardous Uses/Places of Assembly | 10. ☐ Swimming Pools, Spas and Hot Tubs | |
| | 7. ☐ Sprinklers/Standpipes | 11. ☐ LPGas Tanks | |

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.

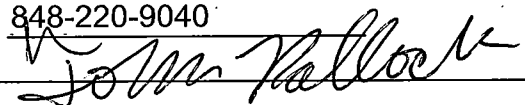
☒ Check if contractor.

Agent Name **Trinity Solar**

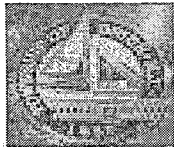
Address **2211 Allenwood Rd.**

Wall, NJ 07719

Telephone **848-220-9040**

Signature 

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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 8/31/2018
Control Number C-18-002663
Permit Number 18-2208
Permit Issue Date 8/13/2018
Certificate Number 18-2208

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 730 OLD BURNT TAVERN RD. Brick Township, NJ Block: 1280.72 Lot: 24 Qual: _____
Owner in Fee: DENNIS MCMICKLE
Owner Address: 730 OLD BURNT TAVERN RD BRICK NJ 08724
Telephone: [REDACTED]
Contractor: Timothy Solar
Address: 2211 Allenwood Rd. Wall NJ 07719
Telephone: (732) 780-3779 Fax: (732) 780-6671
License Number or Builders Registration Number: _____ Federal Emp. Number: 22-3292324

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: SOLAR PANELS - ...INSTALL 5.1 kw ROOF MOUNT PHOTOVOLTAIC SOLAR SYSTEM

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

Date Printed: 8/31/2018

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

Fee: \$0.00

Check Number: _____

Collected By: _____

Page 1



BUILDING SUBCODE TECHNICAL SECTION



Date Received
Control #

8/13/18

Date Issued
Permit #

18-2208

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

Block 1280.72 Lot 24 Qualification Code _____

Work Site Location _____

730 Old Burnt Tavern Road, Brick, NJ

Owner in Fee: McMickle, Dennis-

T. _____ e. _____

Address 730 Old Burnt Tavern Road

street municipality zip code

Contractor: Trinity Solar Tel. (848) 220-9040

Address 2211 Allenwood Rd. e-mail _____

Wall, NJ 07719 email: applications.nj@trinitysolarsystems.com

Contractor License No. or Builder Registration No. 13VH01244300 Exp. Date 3-31-19

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 223292324 FAX: (848) 220-9139

JOB SUMMARY (Office Use Only)					
PLAN REVIEW	INSPECTIONS				
Date Initial	Dates (Month/Day)				
	Type Failure Failure Approval Initial				
☐ No Plans Required	Footing				
☒ All	Footing Bonding				
☐ Footings/Foundations	Foundation				
☐ Structural/Framework	Slab				
☐ Exterior	Frame				
☐ Interior	Truss Sys./Bracing				
Joint Plan Review Required:	Barrier-Free				
☐ Elec ☐ Plumb ☐ Fire ☐ Elevator	Insulation				
SUBCODE APPROVAL for PERMIT	Finishes - Base Layer				
Date: <u>08/13/18</u>	Finishes - Final				
Approved by: <u>NCK</u>	Energy				
SUBCODE APPROVAL for CERTIFICATE	Mechanical				
☐ CO ☐ CCO ☐ CA	TCO				
Date: <u>08/27/18</u>	Other				
Approved by: <u>NCK</u>	Final				
	Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____ Constr. Class Present _____ Proposed _____

No. of Stories _____

Height of Structure _____ ft. State Approved _____ HUD _____

Area — Largest Floor _____ sq. ft. Est. Cost of Bldg. Work:

New Bldg. Area/All Floors _____ sq. ft. 1. New Bldg. \$ _____

Volume of New Structure _____ cu. ft. 2. Rehabilitation \$ _____

Max. Live Load _____ 3. Total (1 + 2) \$ 1,214

Max. Occupancy Load _____

U.C.C. F110 (rev. 11/09)
Internet version

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: Tom Pollock

Print name here: Tom Pollock

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

INSTALLATION OF MOUNTING AND PV SOLAR SYSTEM ON ROOF.

(17)

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Rehabilitation
- ☐ Roofing
- ☐ Siding
- ☐ Fence _____ Height (exceeds 6')
- ☐ Sign _____ Sq. Ft.
- ☐ Pool
- ☐ Retaining Wall _____ Sq. Ft.
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Radon Remediation
- ☒ Other Racking
- ☐ Demolition

FEE (Office Use Only)

\$ _____

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.



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 1280.72 Lot 24 Qualification Code _____

Work Site Location 730 Old Burnt Tavern Road, Brick, NJ

Owner in Fee: McMickle, Dennis-

Tel. [REDACTED] e-mail [REDACTED]

Address 730 Old Burnt Tavern Road
street municipality zip code

Contractor: Trinity Solar Tel. (848) 220-9040

Address 2211 Allenwood Rd. e-mail _____

Wall, NJ 07719 e-mail: applications.nj@trinitysolarsystems.com

Contractor License No. 15474A Exp. Date 3-31-21

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. 223292324 FAX: (848) 220-9139

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

[] Pole/Pad # _____ [] Temporary [] Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 16,126

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Failure	Approval Initial
[] No Plans Required		Rough			
[] Partial -Underslab Utilities Approved		Barrier-Free			
Date _____ Approved by: _____		Trench			
[x] Electric Plans Approved		Temp. Serv.			
Date <u>7/31/18</u> Approved by: <u>PJC</u>		Constr. Serv.			
Joint Plan Review Required:		TCO			
[] Bldg. [] Plumb. [] Fire. [] Elev.		Other			
SUBCODE APPROVAL for PERMIT		Service			
Date <u>7/31/18</u>		Final			
Approved by: <u>[Signature]</u>		Barrier-Free			
SUBCODE APPROVAL for CERTIFICATE		Temp. Cut-in-Card Date Issued			
[] CO [] CCO [] SA		Final Cut-in-Card Date Issued			
Date <u>8/23/18</u>		Annual Pool Inspection			
Approved by: <u>[Signature]</u>		Date of Grounding and Bonding Certification			

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here: [Signature]

Print name here: Charles Bonicker

[x] Licensed Elec. Contractor [] Certified Landscape Irrigation Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: INSTALLATION OF INVERTERS AND PV SOLAR PANELS

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	_____
_____	_____	<u>Panels</u>	_____
_____	_____	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	_____
1	60	KW Transformer/Generator AMP	_____
1	20	AMP Service Disconnect Disconnect	_____
_____	_____	AMP Subpanels	_____
_____	_____	AMP Motor Control Center KW Inverter	_____
1	3.8	KW Elec. Sign/Outline Light Inverter	_____
1	5.1	<u>KW PV Solar System</u>	_____

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

Date Received 8/13/18
Control # 18-2208
Date Issued _____
Permit # _____



CONSTRUCTION PERMIT

Date Issued 8/13/18
Control # C-18-002663
Permit # 18-2208

IDENTIFICATION Block: 1280.72 Lot: 24 Qualifier _____
Work Site Location: 730 OLD BURNT TAVERN RD. Brick Township, NJ Contractor Trinity Solar
Address 2211 Allenwood Rd. Wall NJ 07719
Owner in Fee DENNIS MCMICKLE
730 OLD BURNT TAVERN RD. BRICK NJ 08724 Telephone: (732) 780-3779 / Ext.9045
Lic. No. or Bldrs. Reg. No. 15821C 13VH01244300 34EB01547400
Telephone: _____ Federal Employee No. 223232324

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:

SOLAR PANELS...INSTALL 5.1 kw ROOF MOUNT PHOTOVOLTAIC SOLAR SYSTEM

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 \$17,340

D. Neumann Jr
Construction Official

8/9/18
Date

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$150
Electrical	\$275
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$33
CO Fee	
Other	\$0
Total	\$458
Check No.	<u>15562</u>
Cash	\$0
Credit	\$0
Collected By	

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.

DATE REC'D

PERMIT #4

DATE ISSUED 8/13/18

QUALIFIER:

SITE ADDRESS: 730 Old Burnt Tavern Road

1. NAME OF OWNER IN FEE: McMickle, Dennis-

COMPLETE ADDRESS: 730 Old Burnt Tavern Road Brick, New Jersey 08724 United States

PHONE # [REDACTED] EMAIL [REDACTED]

2. NAME OF APPLICANT: _____ Trinity Solar

APPLICANT ADDRESS: _____ 2211 Allenwood Rd, Wall, NJ 07719

PHONE # (732)780-3779 ext 9040 EMAIL: trinity.permitting@trinitysolarsystems.com

3. RESPONSIBLE PERSON FOR WORK: Charles Bonicker

PHONE# (732)780-3779 ext 9040 FAX# (848)220-9139

4. SIGNATURE OF APPLICANT:

FEE SUMMARY:

APPLICATION FEE: \$ 75

OTHER:

TOTAL:**RESIDENTIAL:** Single Family.

COMMERCIAL:

EXISTING USE: Single Family

PROPOSED USE Install Solar

BOARD APPROVAL: _____ PB _____ ZB

RESOLUTION#:

APPROVAL DATE:

PROJECT DESCRIPTION: (PLEASE CHECK APPLICABLE WORK & DESCRIBE)

*NEW BUILDING: _____ *ADDITION _____ *ALTERATION _____ *PORCH _____ *DECK _____

POOL: ABOVE GROUND _____ IN GROUND _____ FENCE: HEIGHT _____ TYPE _____

HEIGHT: _____ (*APPLICABLE)

OTHER Install solar panels on roof.

DESCRIPTION: Install 5.1 KW PV solar system with 17 modules using Solar Edge technology. Solar panels will be flat mounted on roof, not to exceed the roof peak.

ZONING REVIEW:

DATE REVIEWED: 7-24-18 DATE DENIED: _____ DATE APPROVED: 7-24-18 INTLS: Cu

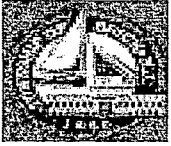
(SEE BACK PAGE)

OFFICE USE ONLY

ZONING REVIEW:

DATE REVIEWED: 7/24/18 DATE DENIED: — DATE APPROVED: 7/24/18 INTLS: NO

[illegible]



Brick Township
401 Chambers Bridge Rd.
Brick, NJ 08723
(732) 262-1336

Date Issued: _____
Application Number: ZA-18-00875
Application Date: 7/18/2018
Project Number: _____
Permit Number: _____
Fee: \$75.00

Zoning Permit

Worksite **730 OLD BURNT TAVERN RD.**
Location: **Brick Township, NJ 08724**

Owner: **CERTA, PETER M JR & FERGUSON, N M**
Address: **730 OLD BURNT TAVERN RD**
BRICK, NJ 08724

Applicant: **Trinity Solar**
Address: **2211 Allenwood Rd.**
Wall, NJ 07719

Block: 1280.72 Lot: 24 Qualifier: _____ Zone: R-7.5

This Certifies that an application for the issuance of a Zoning Permit has been examined.

Present Use: Single-Family Residential

☐ Non Conforming Use

☐ Non Conforming Structure

Proposed Use: Single-Family Residential

Work Description:

Solar Energy System - 17- 300W Trina Solar, 5.1kW MOSAIC, mounted on the roof of the house.

Additional Zoning Permit is required for additional work.

Application Approved Date: 7/24/2018

Upon review it was determined that the Zoning Permit:

☒ Permitted by Ordinance

☐ Permitted by Variance approved on: _____

☐ Approved with Conditions

☐ Valid Nonconforming Use/Structure is established by

☐ Zoning Board of Adjustment

☐ Zoning Officer

Christopher J. Romano, Assistant Zoning Officer

7/24/2018

Date

Sean Kinnevy, Zoning Officer

7/24/18

Date

0003/003

01/17/2013 THU 11:31 FAX 7322622941 Brick Comm Dev/Land Use

ENGINEERING PERMIT APPLICATION

BLOCK: 1280.72 LOT: 24 ADDRESS: 730 Old Burnt Tavern Road

RECEIVING CLERK: _____
PERMIT #: _____

IDENTIFICATION:

1. WORK SITE ADDRESS: 730 Old Burnt Tavern Road

2. NAME OF OWNER IN FEE: McMickle, Dennis-
ADDRESS: 730 Old Burnt Tavern Road PHONE #: [REDACTED]
FAX #: ()

3. PRINCIPAL CONTRACTOR: Trinity Solar
ADDRESS: 2211 Allenwood Road PHONE #: (732) 780-3779
Wall, NJ 07719 FAX #: (848) 220-9139

4. ARCHITECT OR ENGINEER: _____
ADDRESS: _____ PHONE #: ()

5. RESPONSIBLE PERSON FOR WORK: _____
ADDRESS: _____
PHONE #: () FAX #: () E-MAIL: _____

PROJECT DESCRIPTION: ☐ GRADING/CLEARING ☐ ROAD OPENING
☐ SOIL REMOVAL/FILL ☐ RETAINING WALL ☐ POOL
☐ BULKHEAD/DOCK ☐ DWELLING ☐ TREE REMOVAL
☐ OTHER Install 5.1 kw solar panels on roof. Panels not to exceed
roof width but will add 6" to roof height.
LENGTH: _____ WIDTH: _____ HEIGHT: _____

FEE SUMMARY:

APPLICATION FEE: \$ _____

VIEW FEE: \$ _____

INSPECTION FEE: \$ _____

OTHER: \$ _____

BOND(S): \$ _____

TOTAL: \$ _____

SPECIAL CONDITIONS:

OCEAN COUNTY SOILS: _____

DRAINAGE EASEMENTS: _____

UTILITY EASEMENTS: _____

CONSERVATION EASEMENTS: _____

FEMA REQUIREMENTS: _____

D.E.P. PERMITS: _____

BOARD APPROVAL: ☐ PB ☐ ZB

APPLICATION NUMBER: _____

APPROVED DATE: _____

ENGINEERING REVIEW:

DATE RECEIVED: _____ DATE REJECTED: _____ DATE APPROVED: _____ INITIALS: _____

TOWNSHIP OF BRICK

OCEAN COUNTY, NEW JERSEY
401 CHAMBERS BRIDGE ROAD, BRICK, N.J. 08723

Department of Land Use and Community
Development
Division of Land Use & Planning
732-262-1027
Fax: 732-262-2941
www.twp.brick.nj.us



John G. Ducey, Mayor
Township Council:
Susan Lydecker - President
Jim Fozman - Vice President
Heather deJong
Bob Moore
Paul Mummolo
Mariana Pontorero
Andrea Zapic

ENGINEERING PLOT PLAN EXEMPT FORM (ONLY IF NOT IN A FLOOD ZONE)

Block- 1280.72 Lot 24

Property Address: 730 Old Burnt Tavern Road

I, Trinity Solar of 2211 Allenwood Road Wall, NJ 07719

(name)
(address)
request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, etc. as outlined in the Township Code, Chapter 245, Section 245-29.

[Signature]
APPLICANT SIGNATURE

The following shall be submitted with this request:

1. Submit surveys locating existing dwelling and proposed addition. Discussions of the addition should be included.
2. Proof that the property is not located in a Flood Hazard Area.

Note: Prior to approval a site inspection by the Engineering Department will be performed to verify that the proposed addition will not create a drainage problem.

FOR OFFICE USE ONLY

Approved on: _____ Signed: _____
Rejected on: _____ Signed: _____
Comments: _____

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Board of Exam. of Electrical Contractors

HAS LICENSED

TRINITY HEATING & AIR INC DBA TRINITY SOLAR
CHARLES P BONICKER
2211 Allenwood Road
Wall Township NJ 07719

FOR PRACTICE IN NEW JERSEY AS A(N): Electrical Business Permit

02/28/2018 TO 03/31/2021
VALID

34EB01547400
LICENSE/REGISTRATION/CERTIFICATION #


Signature of Licensee/Registrant/Certificate Holder


ACTING DIRECTOR

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

NOT AN
ELECTRICIAN'S
OR PLUMBER'S
LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

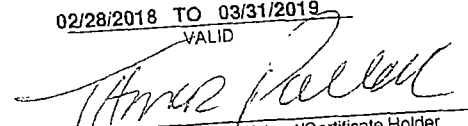
HAS REGISTERED

TRINITY HEATING & AIR, INC.
Tom Pollock
2211 Allenwood Road
Wall NJ 07719

FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Contractor

02/28/2018 TO 03/31/2019
VALID

13VH01244300
LICENSE/REGISTRATION/CERTIFICATION #


Signature of Licensee/Registrant/Certificate Holder


ACTING DIRECTOR

 OCEAN COUNTY CLERK'S OFFICE RECORDING DOCUMENT COVER SHEET SCOTT M. COLABELLA OCEAN COUNTY CLERK P.O. BOX 2191 TOMS RIVER, NJ 08754-2191 (732) 929-2110 www.oceancountyclerk.com	 INSTR # 2018043022 DR BK 17103 PG 1007 RECORDED 05/03/2018 10:54:24 AM SCOTT M. COLABELLA, COUNTY CLERK OCEAN COUNTY, NEW JERSEY RTF TOTAL TAX \$784.25								
DATE OF DOCUMENT: (Enter Date as follows: 00/00/0000) 4/22/2018	OFFICIAL USE ONLY								
TYPE OF DOCUMENT: (Select Doc Type from Drop-Down Box) Deed	<table border="1"> <tr> <td align="center" colspan="2">COUNTY OF OCEAN</td> </tr> <tr> <td>CONSIDERATION: 177,500.00</td> <td></td> </tr> <tr> <td>REALTY TRANSFER FEE: 784.25</td> <td></td> </tr> <tr> <td>RE 5-3-18</td> <td>BY [Signature]</td> </tr> </table> OFFICIAL USE ONLY - REALTY TRANSFER FEE	COUNTY OF OCEAN		CONSIDERATION: 177,500.00		REALTY TRANSFER FEE: 784.25		RE 5-3-18	BY [Signature]
COUNTY OF OCEAN									
CONSIDERATION: 177,500.00									
REALTY TRANSFER FEE: 784.25									
RE 5-3-18	BY [Signature]								
FIRST PARTY NAME: (Enter Last Name, First Name) PETER MICHAEL CERTA JR. and NICOLE MARIE FERGUSON, Formerly Husband and Wife	SECOND PARTY NAME: (Enter Last Name, First Name) DENNIS MCMICKLE								
ALL ADDITIONAL PARTIES: (Enter Last Name, First Name)	RETURN NAME AND ADDRESS: Green Label Title 2520 Highway 35, Suite 105, Valley Park East Manasquan, NJ 08736								

THE FOLLOWING SECTION IS REQUIRED FOR DEEDS ONLY	
BLOCK: 1280.72	LOT: 24, 25 and 26
MUNICIPALITY: Township of Brick	
CONSIDERATION: \$177,500.00	
MAILING ADDRESS OF GRANTEE: (Enter Street Address, Town, State, Zip Code) 730 Old Burnt Tavern Rd. Brick, NJ 08724	

THE FOLLOWING SECTION IS FOR ORIGINAL MORTGAGE BOOKING & PAGING INFORMATION FOR ASSIGNMENTS, RELEASES, SATISFACTIONS, DISCHARGES & OTHER ORIGINAL MORTGAGE AGREEMENTS ONLY	
ORIGINAL BOOK:	ORIGINAL PAGE:

OCEAN COUNTY CLERK'S OFFICE RECORDING DOCUMENT COVER SHEET

Please do not detach this page from the original document as it
contains important recording information and is part of the permanent record.

This document prepared by

Name: Natalie Pavone, Esq.
Firm/Company:
Address: 608 Main Street
Suite A
City, State, Zip: Belmar, NJ 07719
Phone: (954) 592-7321

COUNTY OF OCEAN	
CONSIDERATION	177,500.00
REALTY TRANSFER FEE	784.25
DATE	5-3-18 BY [Signature]

-----Above This Line Reserved For Official
Use Only-----

DEED

This Deed is made on April 27 2018 Delivered on 4/30/18

BETWEEN, Peter Michael Certa Jr. and Nicole Marie Ferguson, Formerly Husband and Wife, whose address is 730 Old Tavern Road, Brick Township, NJ 08724, referred to as the Grantor,

AND Dennis McMickle, whose address is about to be 730 Old Burnt Tavern Road, Brick Township, NJ 08724, referred to as Grantee.

The words "Grantor" and "Grantee" shall mean all Grantors and all Grantees listed above.

Transfer of Ownership. The Grantor grants and conveys (transfers ownership of) the property described below to the Grantee, This transfer is made for the sum of ONE HUNDRED SEVENTY SEVEN THOUSAND FIVE HUNDRED AND 00/100 (\$177,500.00) DOLLARS. The Grantor acknowledges receipt of the money.

Tax map Reference. (N.J.S.A. 46:15-2.1) Municipality of BRICK TOWNSHIP
Block No. 1280.72 Lot No. 24, 25, AND 26 Account No.

Property. The property consists of the land and all the buildings and structures on the land in the Township of Brick, County of Ocean and the State of New Jersey. The legal description is:

SEE SCHEDULE A ATTACHED HERETO.

Being the same premises conveyed to PETER MICHAEL CERTA JR and NICOLE MARIE FERGUSON, HUSBAND AND WIFE, by Deed from JOHN C. HEFFERON, III, UNMARRIED, dated 12/21/12 and recorded 12/31/12 in the Ocean County Clerk/Register's Office in Deed Book 15405, Page 206.

Subject to easements, conditions, covenants and restrictions of record and to municipal rules, ordinances and regulations.

The property is more commonly known as 730 Old Burnt Tavern Road, Brick, New Jersey 08724.

Promises by Grantor. The Grantor promises that the Grantor has done no act to encumber the property. This promise is called "covenant as to grantor's acts" (N.J.S.A. 46:4-6). This promise means that the Grantor has not allowed anyone else to obtain any legal rights which affect the property (such as by making a mortgage or allowing a judgment to be entered against the Grantor).



**SCHEDULE A-5
LEGAL DESCRIPTION**

Issuing Office File No. GL-9791

ALL that certain lot, piece or parcel of land, with the buildings and improvements thereon erected, situate, lying and being in the Township of Brick, in the County of Ocean, State of New Jersey:

Known and designated as Lots 24, 25 and 26 in Block 72 as set forth on a certain map entitled, "Revised Map of Knollwood Section 3, Part of Riviera Beach" situated in the Township of Brick, County of Ocean, State of NJ, which map was filed on April 12, 1952 in the Ocean County Clerk's Office as Map No. B-87.

NOTE: Being Lot(s) 24, 25 and 26 , Block(s) 1280.72; on the Official Tax Map of Township of Brick, County of Ocean, State of New Jersey.

This is not a certified copy

This page is only a part of a 2016 ALTA® Commitment for Title Insurance issued by Westcor Land Title Insurance Company. This Commitment is not valid without the Notice; the Commitment to Issue Policy; the Commitment Conditions; Schedule A; Schedule B, Part I—Requirements; Schedule B, Part II—Exceptions; and a counter-signature by the Company or its issuing agent that may be in electronic form.



State of New Jersey
SELLER'S RESIDENCY CERTIFICATION/EXEMPTION

GIT/REP-3
(9-2015)

(Please Print or Type)

SELLER'S INFORMATION

Name(s)

Peter Michael Certa Jr.

Current Street Address

1 Stockton Way

City, Town, Post Office Box

Howell

State

NJ

Zip Code

07731

PROPERTY INFORMATION

Block(s)

1280.72

Lot(s)

24, 25, and 26

Qualifier

Street Address

730 Old Tavern Road

City, Town, Post Office Box

Brick

State

NJ

Zip Code

08742

Seller's Percentage of Ownership

50%

Total Consideration

\$177,500

Owner's Share of Consideration

\$88,750

Closing Date

4/30/2018

SELLER'S ASSURANCES (Check the Appropriate Box) (Boxes 2 through 14 apply to Residents and Nonresidents)

1. ☒ Seller is a resident taxpayer (individual, estate, or trust) of the State of New Jersey pursuant to the New Jersey Gross Income Tax Act, will file a resident gross income tax return, and will pay any applicable taxes on any gain or income from the disposition of this property.
2. ☐ The real property sold or transferred is used exclusively as a principal residence as defined in 26 U.S. Code section 121.
3. ☐ Seller is a mortgagor conveying the mortgaged property to a mortgagee in foreclosure or in a transfer in lieu of foreclosure with no additional consideration.
4. ☐ Seller, transferor, or transferee is an agency or authority of the United States of America, an agency or authority of the State of New Jersey, the Federal National Mortgage Association, the Federal Home Loan Mortgage Corporation, the Government National Mortgage Association, or a private mortgage insurance company.
5. ☐ Seller is not an individual, estate, or trust and is not required to make an estimated gross income tax payment.
6. ☐ The total consideration for the property is \$1,000 or less so the seller is not required to make an estimated income tax payment.
7. ☐ The gain from the sale is not recognized for federal income tax purposes under 26 U.S. Code section 721, 1031, or 1033 (CIRCLE THE APPLICABLE SECTION). If the indicated section does not ultimately apply to this transaction, the seller acknowledges the obligation to file a New Jersey income tax return for the year of the sale and report the recognized gain.
☐ Seller did not receive non-like kind property.
8. ☐ The real property is being transferred by an executor or administrator of a decedent to a devisee or heir to effect distribution of the decedent's estate in accordance with the provisions of the decedent's will or the intestate laws of this State.
9. ☐ The real property being sold is subject to a short sale instituted by the mortgagee, whereby the seller agreed not to receive any proceeds from the sale and the mortgagee will receive all proceeds paying off an agreed amount of the mortgage.
10. ☐ The deed is dated prior to August 1, 2004, and was not previously recorded.
11. ☐ The real property is being transferred under a relocation company transaction where a trustee of the relocation company buys the property from the seller and then sells the house to a third party buyer for the same price.
12. ☐ The real property is being transferred between spouses or incident to a divorce decree or property settlement agreement under 26 U.S. Code section 1041.
13. ☐ The property transferred is a cemetery plot.
14. ☐ The seller is not receiving net proceeds from the sale. Net proceeds from the sale means the net amount due to the seller on the settlement sheet.

SELLER'S DECLARATION

The undersigned understands that this declaration and its contents may be disclosed or provided to the New Jersey Division of Taxation and that any false statement contained herein may be punished by fine, imprisonment, or both. I furthermore declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete. By checking this box ☐ I certify that a Power of Attorney to represent the seller(s) has been previously recorded or is being recorded simultaneously with the deed to which this form is attached.

4-27-18

Date

Signature

(Seller) Please indicate if Power of Attorney or Attorney in Fact

Date

Signature

(Seller) Please indicate if Power of Attorney or Attorney in Fact



State of New Jersey
SELLER'S RESIDENCY CERTIFICATION/EXEMPTION

GIT/REP-3
(9-2015)

(Please Print or Type)

SELLER'S INFORMATION

Name(s)

Nicole Marie Ferguson

Current Street Address

962 Mercer Drive

City, Town, Post Office Box

Toms River

State

NJ

Zip Code

08753

PROPERTY INFORMATION

Block(s)

1280.72

Lot(s)

24, 25, and 26

Qualifier

Street Address

730 Old Tavern Road

City, Town, Post Office Box

Brick

State

NJ

Zip Code

08742

Seller's Percentage of Ownership

50%

Total Consideration

\$177,500

Owner's Share of Consideration

\$88,750

Closing Date

4/30/2018

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3. ☐ Seller is a mortgagor conveying the mortgaged property to a mortgagee in foreclosure or in a transfer in lieu of foreclosure with no additional consideration.
4. ☐ Seller, transferor, or transferee is an agency or authority of the United States of America, an agency or authority of the State of New Jersey, the Federal National Mortgage Association, the Federal Home Loan Mortgage Corporation, the Government National Mortgage Association, or a private mortgage insurance company.
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8. ☐ Seller did not receive non-like kind property.
9. ☐ The real property is being transferred by an executor or administrator of a decedent to a devisee or heir to effect distribution of the decedent's estate in accordance with the provisions of the decedent's will or the intestate laws of this State.
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4/30/2018

Date

Nicole Marie Ferguson

Signature

(Seller) Please indicate if Power of Attorney or Attorney in Fact

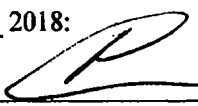
Date

Signature

(Seller) Please indicate if Power of Attorney or Attorney in Fact

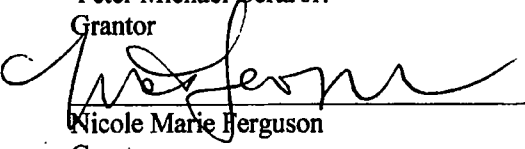
Signatures. The Grantor signs this Deed as of the date at the top of the first page.

WITNESS the Grantor's hand this the 27th day of April 2018:



Peter Michael Certa Jr.

Grantor



Nicole Marie Ferguson

Grantor

State of New Jersey :

ss:

County of Ocean :

I CERTIFY that on 4/27/18, Peter Michael Certa Jr. personally came before me and acknowledged under oath to my satisfaction, that he):

a) is named in and personally signed the attached document; and

b) signed and delivered this document as his act and deed.



NOTARY PUBLIC

State of New Jersey

State of New Jersey :

ss:

County of Ocean :

I CERTIFY that on 4/30/18, Nicole Marie Ferguson personally came before me and acknowledged under oath to my satisfaction, that he):

a) is named in and personally signed the attached document; and

b) signed and delivered this document as his act and deed.



NOTARY PUBLIC

State of New Jersey

Natalie L. Pavone
Attorney at Law
State of New Jersey

Natalie L. Pavone
Attorney at Law
State of New Jersey

Grantor's Name, Address, phone:

Peter M. Certa Jr and Nicole M.
Ferguson
730 Old Burnt Tavern Road
Brick, NJ 08724

Grantee's Name, Address, phone:

Dennis McMickle
730 Old Burnt Tavern Road
Brick, NJ 08882

SEND TAX STATEMENTS TO GRANTEE

RECORD AND RETURN TO:

Joseph Colucci, Esquire
1 Hadley Avenue
Toms River, NJ 08753



WESTSHORE
DESIGN ENGINEERS, P.C.
100 GREAT OAKS BLVD. | SUITE 117A
ALBANY | NEW YORK | 12203

To: Trinity Solar
2211 Allenwood Rd.
Wall, NJ 07719

Date: July 10, 2018
Ref.: 18070326

Subject: McMickle Residence
730 Old Burnt Tavern Rd.
Brick, NJ

Dear Trinity Solar,

The following references the McMickle Residence in Brick, NJ:

1. Existing roof framing:

Conventional framing is 2x6 at 24"o.c. with a 9'-6" span (horizontal rafter projection). **This existing structure is capable to support all the loads that are indicated below for this photovoltaic project.**

2. Roof Loading:

- 4.33psf dead load (modules plus mounting hardware)
- 20psf ground snow load
- 5.7psf roof materials (1.7psf 2x6, 1.5psf sheathing, 2.5psf asphalt shingles)
- Exposure Category B, 125mph wind uplift live load of 23.09psf (wind resistance)

This installation design will be in general conformance to the manufacturer's specifications, and is in compliance with all applicable laws, codes, and ordinances, and specifically N.J.A.C. 5:23-6 (Rehabilitation Subcode), International Residential Code/IRC 2015 NJ Edition, N.J.A.C. 5:23-3.21. **The spacing and fastening of the mounting brackets is to have a maximum of 48" o.c. span between mounting brackets and secured using 5/16" diameter corrosion resistant steel lag bolts.** In order to evenly distribute the load across the roof rafters, there shall be a minimum of 2 mounting brackets per rafter (5" lags required) & min. 2-1/2" penetration of lag bolt per bracket beyond roof materials, which is adequate to resist all 125mph wind live loads including wind shear. Per NDS Section 11.1.4 clearance holes equal to the diameter of the shank need to be bored into a primary framing member for the full length to the threaded portion of the screw to avoid splitting of the framing member.

Thank you.

Westshore Design Engineers

FILE COPY

John Eibert
Project Coordinator

7-10-2018
Nicolas Nitti, PE
President



Brick Twp



NJ, Electrical Contractor Business Permit: 34EB01547400

NJ, Home Improvement Contractor: 13VH01244300

For other jurisdictions, please visit: <http://www.trinity-solar.com/about-us/locations-and-licenses>

CONFIDENTIAL

To: Electric Inspector

Attached is the revised electric diagram for the following customer:

Customer Name: McMickle, Dennis-

Address: 730 Old Burnt Tavern Road Brick, New Jersey 08724 United States

Block: 1280.72 Lot: 24 Permit #: 18-2208

Removed fused and unfused disconnect. Changed method and point of interconnection. Please let us know if you need more information.

Our office # is 848-220-9040

Our office fax # is 848-220-9139

Thank You,
Meaghan Schumann

Corporate Headquarters

2211 Allenwood Road
Wall, New Jersey 07719



Made with Earth-Friendly Products

1-800-373-3765

Ph: 732-780-3779

Fax: 732-780-6671

www.TrinitySolarSystems.com