BLOCK 1033.28 LOT 8 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 19-3138

CONSTRUCTION PERMIT APPLICATION C-1004343

NEW JERSEY UNIFORM CONSTRUCTION CODE

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

I. IDENTIFICATION

1. Proposed Work Site at: 105 Malmy Drive Brick, NJ 08724
2. Name of Owner in Fee: Minutoli, Loren
   Tel. [redacted] e-mail permits@goldmedalservice.com
   Address SAME (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: Gold Medal Plumbing Heating Cooling Electric, Inc Tel. (732) 390-3725
   Address 11 Cotters Lane e-mail permits@goldmedalservi
   East Brunswick, NJ 08816
   License No. OR, if new home, Builder Reg. No. 12777 Exp. Date _____
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. 830357354 FAX: (732) 390-3793
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. _____ FAX: _____
6. Responsible Person in Charge once Work has Begun Joseph Todaro
   Tel. (732) 390-3725 FAX: (732) 390-3793

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical		150 ✓	
3. ~~Plumbing~~ MECH		125 ✓	
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee			
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other		29	
13. TOTAL	$		

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

IIb. SUBCODES (Check all that apply)

	Est. Cost	FOR OFFICE USE ONLY (Optional) Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building									
☒ Electrical	3,200								
☒ Plumbing	4,200								
☒ Fire Protection	500								
☐ Elevator									
TOTAL COST	$7,900								

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)

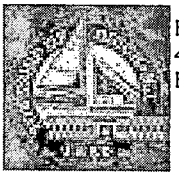
DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing

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

RECEIVED NOV 22 2019

U.C.C. F100-1 (rev. 8/08)



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 1/2/2020
Control Number C-19-004343
Permit Number 19-3138
Permit Issue Date 12/16/2019
Certificate Number 19-3138

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 105 MALMY DR Brick Township, NJ Block: 1033.28 Lot: 8 Qual:

Owner in Fee: MINUTOLI, LOREN

Owner Address: 105 MALMY DRIVE BRICK NJ 08724

Telephone: [redacted]

Contractor GOLD MEDAL PLUMBING HEATING/COOLING ELECTRIC INC

Address 11 COTTERS LN EAST BRUNSWICK NJ 08816

Telephone: (732) 390-3725 Fax: (732) 390-3791

License Number or Builders Registration Number: Federal Emp. Number: 830-357354

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: REPLACEMENT HOT AIR FURNACE

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: 1/2/2020

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

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 Gold Medal Plumbing Heating Cooling Electric, Inc

Address 11 Cotters Lane

East Brunswick, NJ 08816

Telephone (732) 390-3725

Signature_____

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

MECHANICAL INSPECTOR
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit # 12/16/19

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

Block 1033.28 Lot 8 Qualification Code

Work Site Location 105 Malmy Drive Brick, NJ 08724

Owner in Fee: Minutoli, Loren

Tel. [redacted] e-mail permits@goldmedalservice.com

Address same
street municipality zip code

Contractor: Gold Medal Plumbing Heating Cooling Electric, Inc. Tel. (732) 390-3725

Address 11 Cotters Lane e-mail permits@goldmedalservice.c

East Brunswick, NJ 08816

Contractor License No. or Builder Registration No. 12777 Exp. Date

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

Federal Emp. ID No. 830357354 FAX: (732) 390-3793

B. MECHANICAL CHARACTERISTICS

Use Group Present: Proposed:

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

Type: [ ] Hydronic [ ] Hot Air

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

Estimated Cost of Mechanical Work $ 4,200

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Mechanical Plans Approved
Date: Approved by:
Joint Plan Review Required
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire.
[ ] Elev.
SUBCODE APPROVAL for PERMIT
Date:
Approved by:
SUBCODE APPPROVAL for CERTIFICATE
[X] CA [ ] CCO
Date: 12-31-19
Approved by:

INSPECTIONS Type:	DATES Failure	Failure	Approval	Initial
Gas Piping				
Appliance				
Chimney/Vent				
Oil Piping				
Oil Tank				
LPG Tank				
Hydronic Piping				
Fireplace				
Chimney Cert.				
Other FINAL			12-31-19	

FURNACE ONLY

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:

Print name here: Joe Todaro

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

replace furnace

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 12/16/19
Control #
Date Issued
Permit # 19-3139

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

Block 1033.28 Lot 8 Qualification Code

Work Site Location 105 Malmy Drive Brick, NJ 08724

Owner in Fee: Minutoli, Loren

Tel. [redacted] e-mail permits@goldmedalservice.com

Address SAME
street municipality zip code

Contractor: Gold Medal Service, LLC Tel. (732) 390-3725

Address 11 Cotters Lane e-mail permits@goldmedalservice.
East Brunswick, NJ 08816

Contractor License No. 18342 Exp. Date

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

Federal Emp. ID No. 830357354 FAX: (732) 390-3793

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 3,200

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Electric Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date:
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 12-31-19
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			12-31-19 MV	
Barrier-Free				

Dates (Month/Day)

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

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 sign/Contractor sign and seal here:

Print name here: Joseph Todaro

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
replace furnace

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
1		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
2		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	

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

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

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 12/16/19
Control #
Date Issued
Permit # 19-3138

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

Block 1033.28 Lot 8 Qualification Code

Work Site Location 105 Malmy Drive Brick, NJ 08724

Owner in Fee: Minutoli, Loren

Tel. [redacted] e-mail permits@goldmedalservice.com

Address SAME
street municipality zip code

Contractor: Gold Medal Service, LLC Tel. (732) 390-3725

Address 11 Cotters Lane e-mail permits@goldmedalservice.
East Brunswick, NJ 08816

Contractor License No. 18342 Exp. Date

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

Federal Emp. ID No. 830357354 FAX: (732) 390-3793

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 3,200

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[ ] Electric Plans Approved
Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] 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
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				

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 sign/Contractor sign and seal here:

Print name here: Joseph Todaro

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
replace furnace

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
1		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
2		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	

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

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

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

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 1033.28 Lot 8 Qualification Code

Work Site Location 105 Malmy Drive Brick, NJ 08724

Owner in Fee: Minutoli, Loren

[redacted] e-mail permits@goldmedalservice.com

Address SAME
street municipality zip code

Contractor: Gold Medal Service, LLC Tel. (732) 390-3725

Address 11 Cotters Lane e-mail permits@goldmedalservice.

East Brunswick, NJ 08816

Contractor License No. 18342 Exp. Date

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

Federal Emp. ID No. 830357354 FAX: (732) 390-3793

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 3,200

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Electric Plans Approved

Date: Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] 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				

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 sign/Contractor sign and seal here:

Print name here: Joseph Todaro

[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Contr [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
replace furnace

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
1		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
2		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	

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

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

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

CONSTRUCTION PERMIT

Date Issued 12/16/19
Control # C-19-004343
Permit # 19-3138

IDENTIFICATION Block: 1033.28 Lot: 8 Qualifier
Work Site Location: 105 MALMY DR Brick Township, NJ
Owner in Fee MINUTOLI, LOREN
105 MALMY DRIVE BRICK NJ 08724
Telephone: [redacted]

Contractor GOLD MEDAL PLUMBING HEATING/COOLING
Address 11 COTTERS LN EAST BRUNSWICK NJ 08816
Telephone: (732) 390-3725
Lic. No. or Bldrs. Reg. No. 13VH02738600 9734 12777
Federal Employee. No. 830-357354

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:
REPLACEMENT HOT AIR FURNACE

PAYMENTS (Office Use Only)

Building	$0
Electrical	$150
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$125.00
DCA Training Fee	$14
CO Fee	
Other	$0
Total	$289
Check No.	9203
Cash	$0
Credit	$0
Collected By	LC

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 $7,400

Construction Official

12/16/19
Date

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.

GAS FURNACES

EL296UHV

ELITE® SERIES

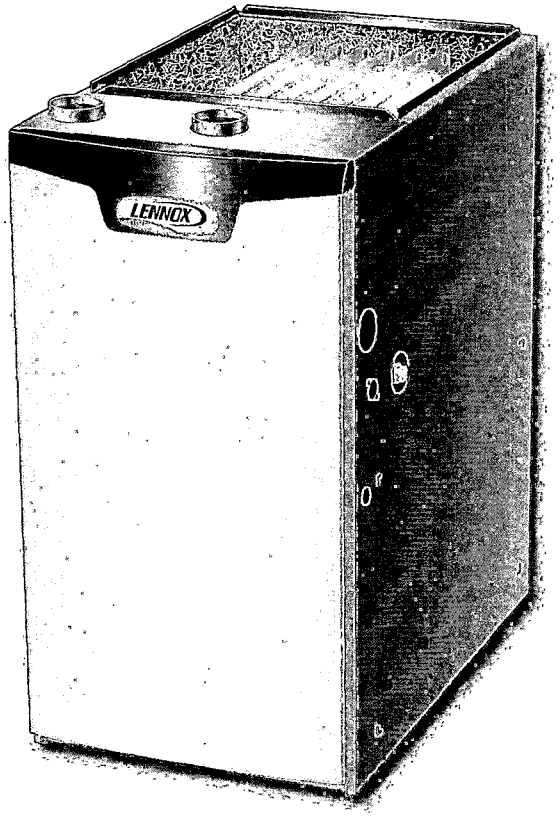
Upflow / Horizontal - Two-Stage Heat - Variable Speed Blower - 60Hz

RESIDENTIAL PRODUCT SPECIFICATIONS

Bulletin No. 210619
October 2019
Supersedes July 2019

ELITE® SERIES

iComfort®
So simple. So smart. So comfortable.



ENERGY STAR

AFUE - 96%
Input - 44,000 to 132,000 Btuh
Nominal Add-on Cooling - 2 to 5 Tons

MODEL NUMBER IDENTIFICATION

EL 2 96 UH 070 X V 36 B

- **Unit Type**: EL = Elite® Series
- **Stages**: 2 = Two-Stage
- **AFUE**: 96 = 96%
- **Configuration**: UH = Upflow/Horizontal
- **Nominal Gas Heat Input**: 045 = 44,000 Btuh; 070 = 66,000 Btuh; 090 = 88,000 Btuh; 110 = 110,000 Btuh; 135 = 132,000 Btuh
- **Low NOx**: X = Units meet California Nitrogen Oxides Standard (40 ng/J)
- **Blower**: V = Variable Speed Blower Motor
- **Nominal Add-On Cooling Capacity**: 24 = 2 tons; 36 = 3 tons; 48 = 4 tons; 60 = 5 tons
- [1] **Cabinet Width**: B = 17-1/2 in.; C = 21 in.; D = 24-1/2 in.

[1] Indoor coils with the same letter designation physically matches the furnace.

SPECIFICATIONS

			Model No.	EL296UH045XV36B	EL296UH070XV36B	EL296UH090XV36C
Gas Heating Performance			[1] AFUE	96%	96%	96%
	High Fire		Input - Btuh	44,000	66,000	88,000
			Output - Btuh	42,000	62,000	84,000
			Temperature rise range - °F	35 - 65	50 - 80	60 - 90
			Gas Manifold Pressure (in. w.g.) Nat. Gas / LPG/Propane	3.5 / 10.0	3.5 / 10.0	3.5 / 10.0
	Low Fire		Input - Btuh	29,000	43,000	57,000
			Output - Btuh	28,000	41,000	55,000
			Temperature rise range - °F	20 - 50	25 - 55	30 - 60
			Gas Manifold Pressure (in. w.g.) Nat. Gas / LPG/Propane	1.7 / 4.9	1.7 / 4.9	1.7 / 4.9
High static - in. w.g.			Heating	0.8	0.8	0.8
			Cooling	1.0	1.0	1.0
Connections in.			Intake / Exhaust Pipe (PVC)	2 / 2	2 / 2	2 / 2
			Gas pipe size IPS	1/2	1/2	1/2
			Condensate Drain Trap (PVC pipe) - i.d.	3/4	3/4	3/4
			with furnished 90° street elbow	3/4 slip x 3/4 Mipt	3/4 slip x 3/4 Mipt	3/4 slip x 3/4 Mipt
			with field supplied (PVC coupling) - o.d.	3/4 slip x 3/4 MPT	3/4 slip x 3/4 MPT	3/4 slip x 3/4 MPT
Indoor Blower			Wheel nominal diameter x width - in.	10 x 9	10 x 9	10 x 9
			Motor output - hp	1/2	1/2	1/2
			Tons of add-on cooling	2 - 3	2 - 3	2 - 3
			Air Volume Range - cfm	465 - 1370	490 - 1365	520 - 1360
Electrical Data			Voltage	120 volts - 60 hertz - 1 phase		
			Blower motor full load amps	7.7	7.7	7.7
			Maximum overcurrent protection	15	15	15
Shipping Data			lbs. - 1 package	130	136	152

NOTE - Filters and provisions for mounting are not furnished and must be field provided.

[1] Annual Fuel Utilization Efficiency based on DOE test procedures and according to FTC labeling regulations. Isolated combustion system rating for non-weatherized furnaces.

SPECIFICATIONS

			Model No.	EL296UH090XV48C	EL296UH090XV60C	EL296UH110XV48C
Gas Heating Performance			AHRI Ref. No.	4988513	4988514	4988515
			[1] AFUE	96%	96%	96%
	High Fire		Input - Btuh	88,000	88,000	110,000
			Output - Btuh	85,000	85,000	105,000
			Temperature rise range - °F	45 - 75	40 - 70	60 - 90
			Gas Manifold Pressure (in. w.g.) Nat. Gas / LPG/Propane	3.5 / 10.0	3.5 / 10.0	3.5 / 10.0
	Low Fire		Input - Btuh	57,000	57,000	72,000
			Output - Btuh	55,000	55,000	70,000
			Temperature rise range - °F	30 - 60	25 - 55	36 - 65
			Gas Manifold Pressure (in. w.g.) Nat. Gas / LPG/Propane	1.7 / 4.9	1.7 / 4.9	1.7 / 4.9
High static - in. w.g.			Heating	0.8	0.8	0.8
			Cooling	1.0	1.0	1.0
Connections in.			Intake / Exhaust Pipe (PVC)	2 / 2	2 / 2	2 / 2
			Gas pipe size IPS	1/2	1/2	1/2
			Condensate Drain Trap (PVC pipe) - i.d.	3/4	3/4	3/4
			with furnished 90° street elbow	3/4 slip x 3/4 Mipt	3/4 slip x 3/4 Mipt	3/4 slip x 3/4 Mipt
			with field supplied (PVC coupling) - o.d.	3/4 slip x 3/4 MPT	3/4 slip x 3/4 MPT	3/4 slip x 3/4 MPT
Indoor Blower			Wheel nominal diameter x width - in.	11 x 11	11 x 11	11 x 11
			Motor output - hp	3/4	1	3/4
			Tons of add-on cooling	2.5 - 4	3 - 5	2.5 - 4
			Air Volume Range - cfm	680 - 1770	840 - 2195	670 - 1760
Electrical Data			Voltage	120 volts - 60 hertz - 1 phase		
			Blower motor full load amps	10.1	12.8	10.1
			Maximum overcurrent protection	15	20	15
Shipping Data			lbs. - 1 package	163	164	173

NOTE - Filters and provisions for mounting are not furnished and must be field provided.

[1] Annual Fuel Utilization Efficiency based on DOE test procedures and according to FTC labeling regulations. Isolated combustion system rating for non-weatherized furnaces.

JOB# 1590666772
Replace furnace
$1900

TAX BOARD 32-262-1030

Tax List Details - Current Year			
Municipality:	Brk	Deed date:	7/30/2008
Owner:	MINUTOLI, LOREN	Block:	1033.28
Mailing address:	105 MALMY DRIVE	Lot:	8
City/State:	BRICK NJ 08724	Qual:	
Location:	105 MALMY DR		
Prop class:	2	Land val:	116,800
Bldg desc:	1SF 1756	Improvement val:	157,100
Land desc:	.2376AC	Exemption 1:	
Addtl lots:		Exemption 2:	
Zone:	R75	Exemption 3:	
Map:	55.4	Exemption 4:	
Year blt:	1960	Net value:	273,900
Book/page:	14084/1128	Last yr taxes:	6351.74
Sale price:	325,000	Prev block:	
Nonusable code:		Prev lot:	
Spcl tax codes:	F02, , ,	Prev qual:	
Exmt Prop Code	000	Init/Fur file date	NA / NA
Statue:		Facility:	

Assessment History				
Year	Prop cls	Land Value	Imprv Val	Net Val
2018	2	116,800	157,100	273,900
2017	2	116,800	157,100	273,900
2016	2	116,800	157,100	273,900
2015	2	116,800	157,100	273,900

Cama Details			
Type/use:	One Family	Story hgt:	1 Story
Design:	Ranch	Roof type:	Gable
Roof mtrl:	Asphalt Shingle	Ext Finish:	AlumVinyl, Pt Brick
Foundation:	Block/Concrete, Concrete Slab	Basement:	1066
Heating src:	Gas	Heat system:	Forced Air, Forced Air
Electric:	Adequate	A/C:	All Combine
Plumbing:			
Fireplace:	1 Story(1)	SFLA:	1756
Attic area:	0	Unf area:	0
# bedrooms:	4	# bathrooms:	2
Attchd items:	Conc Patio, Wood Deck	Total # rooms:	9
Detchd items:			

Sr1a Details

CHIMNEY VERIFICATION FOR REPLACEMENT OF FUEL-FIRED EQUIPMENT

BLOCK 1033.28 LOT 8 QUALIFICATION CODE _____ PERMIT # _____

WORK SITE ADDRESS 105 Malmy Drive Brick, NJ 08724

Owner in Fee Minutoli, Loren

Verifying Individual Joseph Todaro Company Gold Medal PHCE

Address 11 Cotters Lane (Street) East Brunswick (City) NJ (State) 08816 (Zip Code)

Tel: (732) 390-3725 Fax: (732) 390-3793

Check the Appropriate Box(es):

Type of Replacement:

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

Existing Vent/Chimney: **Size** 3

- [ ] "B" Label Vent
- [ ] "L" Label Vent
- [ ] Flexible Liner
- [X] 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:	90K
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 _____ 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 11/21/19 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.

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued

Permit #

IDENTIFICATION Block 1033.28 Lot 8 Qualification Code

Work Site Location 105 Malmy Drive
Brick, NJ 08724

Owner in Fee Minutoli, Loren

Address SAME

Tel. [redacted]

Contractor GOLD MEDAL SERVICE

Address 11 COTTERS LANE
EAST BRUNSWICK, NJ 08816

Tel. (732) 390-3725

Lic. No. or Bldrs. Reg. No.

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 mechanical

DESCRIPTION OF WORK:

replace furnace

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 $ $7900.00

Construction Official

Date

PAYMENTS (Office Use Only)

Building
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA State Permit Fee
Cert. of Occupancy
Other
Total
Check No.
Cash
Collected by

(see reverse side)

U.C.C. F170 (rev. 01/04)

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

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued

Permit #

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Brick, NJ 08724

Owner in Fee Minutoli, Loren

Address SAME

Tel. [redacted]

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Plumbing
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Cert. of Occupancy
Other
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Cash
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U.C.C. F170 (rev. 01/04)

(see reverse side)

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

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued

Permit #

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Brick, NJ 08724

Owner in Fee Minutoli, Loren

Address SAME

Tel. [redacted]

Contractor GOLD MEDAL SERVICE

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EAST BRUNSWICK, NJ 08816

Tel. (732) 390-3725

Lic. No. or Bldrs. Reg. No.

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[✓] ELECTRICAL	[✓] FIRE PROTECTION	[ ] DEMOLITION
[ ] ELEVATOR DEVICES	[ ] ASBESTOS ABATEMENT (Subchapter 8 only)	[✓] OTHER mechanical

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Construction Official

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Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA State Permit Fee
Cert. of Occupancy
Other
Total
Check No.
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U.C.C. F170 (rev. 01/04)

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Brick, NJ 08724

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Plumbing
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