



FIRE SUBCODE
TECHNICAL SECTION



Date Received 4/13/2009
Control # 46051
Date Issued 4/13/2009
Permit # 090198

A. IDENTIFICATION - APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000
Block 36 Lot 12 Qualification Code

Work Site Location: 15 17TH STREET , NJ

Owner in Fee: SPIGARELLI, JUDY

Address 15 17TH STREET BURLINGTON NJ 08016- Email

Tel. 609/2390667

Contractor: BROADVIEW SECURITY Tel. 732/8059432

Address 14B WORLDS FAIR DRIVE SOMERSET NJ 08873- Email

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

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

Fire Alarm Contractor No. Expiration Date:

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

Federal Employee No. 06-1077936 Fax. 732/8059438

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed R-3 Fuel Type Flammable or Combustible
Constr. Class Present Proposed Capacity

Heating Systems: New or Modification to Existing
or Conversion or Replacement

Type: Gas Oil Electric Solar
Other

Location:

Total Cost of Fire Protection Work \$300

Fuel Storage Tank:

Fuel Type Flammable or Combustible
Capacity

Fire Alarm System: New or Existing
Location of Panel:

Fire Suppression/Standpipe System:
New or Existing
Location of Main Control Valve:

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Applicant's Signature/Contractor's Seal and Signature and Printed Name

Certified Contractor

Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

ALARMALARMS

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
System		
110v Interconnected		
CO Detectors/110v		
Alarm Devices (i.e. smoke, heat, pulls, water/flow)	2	
Supervisory Devices (tamperers, low/high air)		
Signaling Devices (horn/strobes, bells)		
Other Devices		
TOTAL	2	\$36.00
Suppression Systems		
Fire Pump GPM Type		
Dry Pipe/Alarm Valves		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fire Appliances Gas Oil Solid		
Fireplace Venting/Metal Chimney		
Other		

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)			
PLAN REVIEW	Date Initial	Type:	Failure	Failure	Approval	Initial	
No Plan Required		Alarm System					
Partial Underslab Utilities Approved		Suppression Sys.					
Date: by:		Standpipe					
Fire Protection Plans Approved		Fire Pump					
Date:		Pre-Eng. System					
Approved by:		Mechanical					
Joint Plan Review Required		Smoke Control					
Building Plumbing		TCO					
Electrical Elevator		Flam/Cumbust Tank					
SUBCODE APPROVAL for PERMIT		Fireplace Venting					
Date:		Final					
Approved by:		Other					
SUBCODE APPROVAL for CERTIFICATE							
CO CCO CA							
Date:							
Approved by:							

Administrative Surcharge	
Minimum Fee	\$40
State Permit Surcharge Fee	\$2
TOTAL FEE	\$42



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B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed R-3 Fuel Type ☐ Flammable or ☐ Combustible
Constr. Class Present _____ Proposed _____ Capacity _____

Heating Systems: ☐ New or ☐ Modification to Existing
or ☐ Conversion or ☐ Replacement

Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
☐ Other _____

Location: _____

Total Cost of Fire Protection Work \$300

Fuel Storage Tank:

Fuel Type ☐ Flammable or ☐ Combustible
Capacity _____

Fire Alarm System: ☐ New or ☐ Existing
Location of Panel: _____

Fire Suppression/Standpipe System:
☐ New or ☐ Existing
Location of Main Control Valve: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Failure	Approval	Initial
☐ No Plan Required			Alarm System	_____	_____	_____	_____
☐ Partial Underslab Utilities Approved			Suppression Sys.	_____	_____	_____	_____
Date: _____ by: _____			Standpipe	_____	_____	_____	_____
☐ Fire Protection Plans Approved			Fire Pump	_____	_____	_____	_____
Date: _____			Pre-Eng. System	_____	_____	_____	_____
Approved by: _____			Mechanical	_____	_____	_____	_____
☐ Joint Plan Review Required			Smoke Control	_____	_____	_____	_____
☐ Building ☐ Plumbing			TCO	_____	_____	_____	_____
☐ Electrical ☐ Elevator			Flam/Cumbust Tank	_____	_____	_____	_____
SUBCODE APPROVAL for PERMIT			Fireplace Venting	_____	_____	_____	_____
Date: _____			Final	_____	_____	_____	_____
Approved by: _____			Other	_____	_____	_____	_____
SUBCODE APPROVAL for CERTIFICATE							
☐ CO ☐ CCO ☐ CA							
Date: _____							
Approved by: _____							

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Applicant's Signature/Contractor's Seal and Signature and Printed Name _____

☐ Certified Contractor

☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

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Method of Alarm/Suppression System Supervision _____

	NUMBER	FEE (Office Use Only)
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Alarm Systems		
☐ System	_____	_____
☐ 110v Interconnected	_____	_____
☐ CO Detectors/110v	_____	_____
Alarm Devices (i.e. smoke, heat, pulls, water/flow)	<u>2</u>	_____
Supervisory Devices (tamperers, low/high air)	_____	_____
Signaling Devices (horn/strobes, bells)	_____	_____
Other Devices	_____	_____
TOTAL	<u>2</u>	<u>\$36.00</u>
Suppression Systems		
Fire Pump _____ GPM Type _____	_____	_____
Dry Pipe/Alarm Valves	_____	_____
Pre-action Valves	_____	_____
Sprinkler Heads (Dry and Wet)	_____	_____
Standpipes	_____	_____
Pre-engineered Systems		
Wet Chemical	_____	_____
Dry Chemical	_____	_____
CO2 Suppression	_____	_____
Foam Suppression	_____	_____
FM200 Suppression	_____	_____
Other	_____	_____
Other Systems		
Kitchen Hood Exhaust System	_____	_____
Smoke Control System	_____	_____
Fire Appliances ☐ Gas ☐ Oil ☐ Solid	_____	_____
Fireplace Venting/Metal Chimney	_____	_____
Other	_____	_____

Administrative Surcharge _____

Minimum Fee \$40

State Permit Surcharge Fee \$2

TOTAL FEE \$42