PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued 12-24-18
Permit # 18-0117

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

Block 158 Lot 6 Qualification Code _____

Work Site Location 1033 Lexington Drive

Owner in Fee: Robert Gentile

Tel. (_____) e-mail _____

Address same (street) Deptford (municipality) 08096 (zip code)

Contractor: P. R. SANDERS, INC. Tel. (856) 429-3086

Address 100 PARK DRIVE, VOORHEES, NJ 08043 e-mail _____

Contractor License No. NJ MPL 6726 Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH00471800

Federal Emp. ID No. _____ FAX: (856) 429-6043

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____

Building Sewer Size _____ Public Sewer _____ Private Septic _____

Water Service Size _____ Public Water _____ Private Well _____

Est. Cost of Plumbing Work $ 1529-

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL for PERMIT
Date: 2-1-19
Approved by: M

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 12-12-18
Approved by: MG

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			12-12-18	MG

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Replace powervent hwh

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	Water Heater powervent	65
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks _____	
	Other _____	
	Other _____	

Administrative Surcharge $ _____
Minimum Fee $ _____
State Permit Surcharge Fee $ _____
TOTAL FEE $ 65

TOWNSHIP OF DEPTFORD
1011 COOPER STREET
DEPTFORD, NJ 08096
856 - 845-5300

Permit Number: 20100117
Update Number:
Control Number: 29145
Application Date: 01/27/2010
Permit Date: 02/25/2010

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block: 158 Lot: 6 Qualification Code:

Work Site Location: 1053 LEXINGTON DR DEPTFORD

Owner In Fee: GENTILE, ROBERT & JOHNSON, JANET
Address: 1053 LEXINGTON DRIVE
DEPTFORD NJ 08096

Telephone: () -

Use Group(s): R-5

Contractor: P R SANDERS INC.
Address: 100 PARK DRIVE
VOORHEES NJ 08043

Telephone: (856) - 429-3086

Lic. No. / Bldrs. Reg. No.: 6726

Federal Emp. No.:

is hereby granted permission to perform the following work :

[ ]BUILDING [X]PLUMBING [ ] DEMOLITION
[ ]ELECTRICAL [ ]FIRE PROTECTION [ ] OTHER
[ ]ELEVATOR DEVICES [ ]MECHANICAL
[ ]ASBESTOS ABATEMENT [ ]LEAD HAZARD ABATEMENT
(Subchapter 8 only)

DESCRIPTION OF WORK:
WATER HEATER

ESTIMATED COST OF WORK:

Cost of Construction:	0.00
Cost of Rehabilitation:	1,629.00
Cost of Demolition:	0.00
Total Cost:	$1,629.00

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.

Frederick J. Fritz,
Construction Official

Date

PAYMENTS (Office Use Only)	
Building	
Electrical	
Plumbing	$65.00
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	$3.00
DCA Minimum	$0.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	**$68.00**
All Fees Waived:	No

Amount to be Paid: **$68.00**

Cash amount: $68.00

Collected by: bap
Receipt No:
Total Cash Amount: $68.00
Total Check Amount:
Total CC Amount:
Grand Total: $68.00

Note:

PLUMBING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control #

Date Issued
Permit # 10-[illegible]-09

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

Block 56 Lot 11 Qualification Code _____

Work Site Location 1058 Burlington Drive

Owner in Fee: Maria Garcia

Tel. (___) ___ e-mail _____

Address Same Pemberton 08068
street municipality zip code

Contractor: P. R. SANDERS, INC. Tel. (856) 429-3086

Address 100 PARK DRIVE, VOORHEES, NJ 08043 e-mail _____

Contractor License No. NJ MPL 6726 Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH00471800

Federal Emp. ID No. [illegible] FAX: (856) 429-6043

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____

Building Sewer Size _____ Public Sewer _____ Private Septic _____

Water Service Size _____ Public Water _____ Private Well _____

Est. Cost of Plumbing Work $ 1500.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[N] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: _____ Approved by: _____
[ ] Plumbing Plans Approved
Date: _____ Approved by: _____
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 2-1-10
Approved by: M Hall

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: _____
Approved by: _____

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

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Replace powervent hwh

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
1	Water Heater powervent	65
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks _____	
	Other _____	
	Other _____	

Administrative Surcharge	$
Minimum Fee	$
State Permit Surcharge Fee	$
TOTAL FEE	$ 65

CHIMNEY CERTIFICATION
FOR REPLACEMENT OF FUEL FIRED EQUIPMENT

BLOCK 158 LOT 4 QUALIFICATION CODE _____ PERMIT #_____

WORK SITE ADDRESS 1053 Lexington Dr. - Deptford Twp. 08096

Applicant Robert Gentile

Certifying Individual Erik Smith Company P.R. Sanders Inc.

Address 100 Park Dr. (Street) Voorhees (City) NJ (State) 08043 (Zip Code)

Tel. (856) 429-3086

Check the Appropriate Box

Type of Replacement:

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

Existing Vent/Chimney:

[ ] B Label Vent
[ ] L Label Vent
[ ] Masonry Chimney – Tile Lined
[ ] Flexible Liner
[X] Power Vent/Exhauster
[ ] Other _____

PLEASE SIGN ONE OF THE FOLLOWING CERTIFICATION STATEMENTS

CERTIFICATION

For Oil to Gas Conversions:

I herby certify that the chimney/vent is free and clear of obstruction and is substantially clean of residue from its previous use serving an oil appliance. I further certify that the chimney/vent is appropriately lined and sized for the appliance being installed

_____ _____
Signature Date

Oil to Oil or Gas to Gas Replacements:

I hereby certify that the existing chimney/vent is free and clear of obstruction. I further certify that the existing chimney/vent is appropriately lined and sized for the appliance being installed.

Erik Smith 1/20/10
Signature Date

Certification Not Submitted:

I choose not to submit a certification. I understand that I will be required to be present for the inspection to remove and reinstall the chimney vent connector.

_____ _____
Signature Date

Direct Vent Appliance:

No certification required:

_____ _____
Signature Date

THIS FORM MUST BE RETURNED TO THE CODE ENFORCEMENT OFFICE PRIOR TO FINAL INSPECTION.

U.C.C. F370 (rev. 3/04)

NOTICE TO PERMIT APPLICANT

The permit, which you have applied for, requires the following:

1. Per the Uniform Fire Safety Act, NJSA 52:27D-198.1 and the Rehabilitation Subcode of the Uniform Construction Code, NJAC 5:23-6.4(f), NJAC 5:23-6.6-13 (f), Smoke detectors will be installed on each level of the dwelling, including the basement. There should be a smoke detector in the vicinity of the bedrooms outside each sleeping area. The smoke detector should be installed as per manufacturer's specifications. Battery powered smoke detectors satisfy this requirement. (The installations of battery powered smoke detectors and those smoke detectors that already exist, do not require an inspection. Therefore **it is the responsibility of the homeowner to ensure that the provisions of NJAC referenced above have been met.**)

2. Per the New Jersey Administrative Code 5:23-3.20 (c) (Amendment effective April 7, 2003), Carbon Monoxide (CO) alarms must be installed and maintained in the immediate vicinity of each sleeping area in any guest room or residential dwelling if the building contains either a fuel burning appliance or an attached garage. CO alarms must be installed as per manufacturer's specifications. (The installations of battery powered and plug-in type CO alarms and those CO alarms that already exist, do not require an inspection. **Therefore, it is the responsibility of the homeowner to ensure that the provisions of NJAC referenced above have been met.**)

Exception: If you are installing any hardwired CO alarms or Smoke Detectors, permits and inspections are required.

☒ I certify by my signature below that I currently have the required Smoke Detectors and Carbon Monoxide (CO) Detectors installed.

OR

☐ I certify by my signature below that I do not currently have the required Smoke Detectors and Carbon Monoxide (CO) Detectors installed, but that these devices will be installed prior to the work being complete.

Date: 1/20/10 Signed: Bob Gentile

Address: 1053 Lexington Dr. Deptford NJ 08096

TOWNSHIP OF DEPTFORD
1011 COOPER STREET
DEPTFORD, NEW JERSEY
845-5300 — EXT. 2223

NEW JERSEY UNIFORM CONSTRUCTION CODE

BUILDING SUBCODE TECHNICAL SECTION

Date Received May 12, 11
Date Issued
Control #
Permit # 11-0370

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

Block 158 Lot 6 Qualification Code

Work Site Location 1053 Lexington Dr Deptford

Owner in Fee: Robert Gentile, Jenny Johnson

Tel. ( ) e-mail

Address 1053 Lexington Dr Deptford
street municipality

Contractor: Paul Sivek Tel. (856) 261-2737
zip code

Address 112 E Herring Rd Magnolia NJ

Contractor License No. or Builder Registration No. 13VH04991100 Exp. Date

Federal Emp. ID No. FAX: ( )

JOB SUMMARY (Office Use Only)

PLAN REVIEW — Date — Initial

- [ ] No Plans Required
- [ ] All
- [ ] Footing
- [ ] Foundation
- [ ] Frame
- [ ] Other

Joint Plan Review Required
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes-Base Layer				
Finishes-Final				
Energy				
Mechanical				
TCO				
Other				
Final			5/21/11	TG
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group: Present Proposed

Constr. Class Present Proposed

No. of Stories

Height of Structure Ft.

Area — Largest Floor Sq. Ft.

New Bldg. Area/All Floors Sq. Ft.

Volume of New Structure Cu. Ft.

Total Land Area Disturbed Sq. Ft.

Est. Cost of Bldg. Work

1. New Bldg. $
2. Rehabilitation $
3. Total (1+2) $ 2500.00

C. CERTIFICATION IN LIEU OF OATH

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

Jenny Johnson Robert Gentile

Applicant Signature/ Contractor's Seal and Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
overlay shingles

TYPE OF WORK

- [ ] New Building
- [ ] Addition
- [ ] Rehabilitation
- [~~x~~] Roofing
- [ ] Siding
- [ ] Fence Height (exceeds 6")
- [ ] Sign Sq. Ft.
- [ ] Pool
- [ ] Asbestos Abatement Subchapter 8
- [ ] Lead Haz. Abatement NJAC 5:17
- [ ] Radon Remediation
- [ ] Other
- [ ] Demolition

FEE (Office Use Only)

$
90

Administrative Surcharge $
Minimum Fee $
State Permit Surcharge Fee $ 4
TOTAL FEE $ 94

UCC/F-110
Professional Printing
(856) 468-7933

1. White-Inspector Copy 2. Canary-Applicant Copy 3. Pink-Office Copy 4. White Tag-Office Copy 06/08

TOWNSHIP OF DEPTFORD
1011 COOPER STREET
DEPTFORD, NJ 08096
856 - 845-5300

Permit Number: 20110390
Update Number:
Control Number: 31305
Application Date: 05/12/2011
Permit Date: 05/13/2011

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block: 158 Lot: 6 Qualification Code:
Work Site Location: 1053 LEXINGTON DR DEPTFORD

Owner In Fee: GENTILE, ROBERT & JOHNSON, JANET
Address: 1053 LEXINGTON DRIVE
DEPTFORD NJ 08096

Telephone:

Use Group(s): R-5

Contractor: PAUL SNOOK
Address: 113 E ADAMS AVE
MAGNOLIA NJ -

Telephone: ()

Lic. No. / Bldrs. Reg. No.:

Federal Emp. No.:

is hereby granted permission to perform the following work :

[X]BUILDING [ ]PLUMBING [ ] DEMOLITION
[ ]ELECTRICAL [ ]FIRE PROTECTION [ ] OTHER
[ ]ELEVATOR DEVICES [ ]MECHANICAL
[ ]ASBESTOS ABATEMENT [ ]LEAD HAZARD ABATEMENT
(Subchapter 8 only)

DESCRIPTION OF WORK:
Roofing

ESTIMATED COST OF WORK:

Cost of Construction:	0.00
Cost of Rehabilitation:	2,500.00
Cost of Demolition:	0.00
Total Cost:	$2,500.00

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.

C. McLaughlin RC. 5/12/11

Christian J McLaughlin, Date
Construction Official

PAYMENTS (Office Use Only)	
Building	$90.00
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	$4.00
DCA Minimum Fee	$0.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	**$94.00**
All Fees Waived:	No

Amount to be Paid: **$94.00**

Cash amount: $94.00

Collected by: rc
Receipt No:
Total Cash Amount: $94.00
Total Check Amount:
Total CC Amount:
Grand Total: $94.00

Note:

TOWNSHIP OF DEPTFORD
1011 COOPER STREET
DEPTFORD, NEW JERSEY
845-5300 — EXT. 2223

NEW JERSEY UNIFORM CONSTRUCTION CODE

BUILDING SUBCODE TECHNICAL SECTION

Date Received May 12, 11
Date Issued
Control #
Permit # 11-0390

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

Block 158 Lot 6 Qualification Code _____

Work Site Location 1053 Lexington Dr Deptford

Owner in Fee: Robert Gentile & Janet Johnson

Tel. ( ) _____ e-mail _____

Address 1053 Lexington Dr Deptford
street municipality zip code

Contractor: Paul Snook Tel. (856) 264-2737

Address 113 E Adams Ave Magnolia NJ

Contractor License No. or Builder Registration No. 13VH04499100 Exp. Date _____

Federal Emp. ID No. _____ FAX: ( ) _____

C. CERTIFICATION IN LIEU OF OATH

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

Janet Johnson Robert Gentile
Applicant Signature/ Contractor's Seal and Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Overlay Shingles

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		

Joint Plan Review Required
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: _____

Approved by: _____

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes-Base Layer				
Finishes-Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group:	Present _____	Proposed _____
Constr. Class	Present _____	Proposed _____
No. of Stories	_____	
Height of Structure	_____	Ft.
Area — Largest Floor	_____	Sq. Ft.
New Bldg. Area/All Floors	_____	Sq. Ft.
Volume of New Structure	_____	Cu. Ft.
Total Land Area Disturbed	_____	Sq. Ft.

Est. Cost of Bldg. Work

1. New Bldg. $ _____
2. Rehabilitation $ _____
3. Total (1+2) $ 2500.00

TYPE OF WORK

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

FEE (Office Use Only)

	$ _____
	_____
	_____
	90
	_____
	_____
	_____
	_____
	_____
	_____
	_____
	_____
Administrative Surcharge	$ _____
Minimum Fee	$ _____
State Permit Surcharge Fee	$ 4
TOTAL FEE	$ 94

UCC/F-110
Professional Printing
(856) 468-7933

1. White-Inspector Copy 2. Canary-Applicant Copy 3. Pink-Office Copy 4. White Tag-Office Copy

06/08

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received / Control # 12/8/11

Date Issued / Permit # 11/7232

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

Block 158 Lot 6 Qualification Code

Work Site Location 1053 Lexington Dr

Owner in Fee: Robert Gentile

Tel. e-mail

Address 1053 Lexington Dr (street) Deptford (municipality) 08096 (zip code)

Contractor: Stevenson Electric Inc. Tel. (609) 267-4200

Address 1305 Deacon Rd. Haines port, NJ 08036 e-mail jeffse@comcast net.

Contractor License No. 10912 Exp. Date 2012

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

Federal Emp. ID No. FAX: (609) 267-6040

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 1,200

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required 11/28/11

[ ] 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: 2-13-12

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final	2-6		2-13	
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's Signature/Contractor's Seal and Signature

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

STEVENSON ELECTRIC INC. 10912 ELECTRICAL CONTRACTOR

2-6-12 D NO entry could not make 2 A.M. insp.

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Removal of existing gas Furnace
Install new 95% gas Furnace

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

Administrative Surcharge $ 65

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

U.C.C. F120 (rev. 12/07) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

TOWNSHIP OF DEPTFORD
1011 COOPER STREET
DEPTFORD, NJ 08096
856 - 845-5300

Permit Number: 20111232
Update Number:
Control Number: 32391
Application Date: 11/22/2011
Permit Date: 12/08/2011

CONSTRUCTION PERMIT

IDENTIFICATION

OWNER/PROPERTY DETAILS

Block: 158 Lot: 6 Qualification Code:
Work Site Location: 1053 LEXINGTON DR DEPTFORD

Owner In Fee: GENTILE, ROBERT & JOHNSON, JANET
Address: 1053 LEXINGTON DRIVE
DEPTFORD NJ 08096

Telephone:

Use Group(s): R-5

Contractor: AUDUBON CESCO CORP
Address: 257 WEST NICHOLSON ROAD
AUDUBON NJ 08107

Telephone: (856) 547-3000

Lic. No. / Bldrs. Reg. No.: 0000288

Federal Emp. No.:

is hereby granted permission to perform the following work :

[ ]BUILDING [X]PLUMBING [ ] DEMOLITION
[X]ELECTRICAL [X]FIRE PROTECTION [ ] OTHER
[ ]ELEVATOR DEVICES [ ]MECHANICAL
[ ]ASBESTOS ABATEMENT [ ]LEAD HAZARD ABATEMENT

(Subchapter 8 only)

DESCRIPTION OF WORK:
FURNACE

ESTIMATED COST OF WORK:

Cost of Construction:	0.00
Cost of Rehabilitation:	3,300.00
Cost of Demolition:	0.00
Total Cost:	$3,300.00

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.

C J McLaughlin KD — 12/8/11

Christian J McLaughlin — Date

Construction Official

PAYMENTS (Office Use Only)

Building	
Electrical	$65.00
Plumbing	$80.00
Fire Protection	$65.00
Elevator Devices	
Mechanical	
VolFee (DCA)	
AltFee (DCA)	$6.00
DCA Minimum Fee	$0.00
Other Fees	
CO Fee	
CCO Fee	
Minimum Fee	
Total	**$216.00**
All Fees Waived:	No

Amount to be Paid: **$216.00**

Cash amount: $216.00

Collected by: KD
Receipt No:
Total Cash Amount: $216.00
Total Check Amount:
Total CC Amount:
Grand Total: $216.00

Note:

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 12/8/11

Date Issued / Permit # 11-1232

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

Block 158 Lot 6 Qualification Code

Work Site Location 1053 Lexington Dr

Owner in Fee Robert Gratile

Address 1053 Lexington Dr

Dentford 07096

Tel

Contractor Frank Papa Plumbing LLC

Address 105 Roosevelt Blvd North

Bayonne NJ. 08207

Tel (609) 266 4467 FAX (609) 266 0273

Contractor License No. 3863

Federal Emp. No.

B. PLUMBING CHARACTERISTICS

Use Group Present gas Furnace Proposed 95 AFUE gas Furnace

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 600

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date: 11-23-11

Approved by: DCW

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				

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.

Frank Papa

Applicant's Signature/Contractor's Seal and Signature

[✓] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
1	Gas Piping	60
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
1	Other Vent pipe pvc	
1	Other Condensate	15

Administrative Surcharge	$
Minimum Fee	$ 80
State Permit Surcharge Fee	$
TOTAL FEE	$

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received
Control # 12-811

Date Issued
Permit # 11-1232

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

Block 158 Lot 6 Qualification Code _____

Work Site Location 1053 Lexington

Owner in Fee: Robert Gentile

Tel. _____ e-mail _____

Address 1053 Lexington (street) Deptford (municipality) 08096 (zip code)

Contractor: Audubon Press Tel. (856) 547-2000

Address 253 W Nicholson RD e-mail _____

Audubon NJ 08106

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

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

Fire Alarm Contractor No. _____ Exp. Date _____

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

Federal Emp. ID N _____ FAX: (_____) _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present gas Proposed gas

Constr. Class: Present _____ Proposed _____

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

Fuel Type: [✓] Gas [ ] Oil [ ] Electric [ ] Solar Other _____

Location: _____

Total Cost of Fire Protection Work $ 2500.00

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 Signature

[ ] Certified Contractor [✓] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Install new gas Furnace

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)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
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		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [✓] Gas [ ] Oil [ ] Solid		65-
Fireplace Venting/Metal Chimney		
Other		
Administrative Surcharge $		
Minimum Fee $		
State Permit Surcharge Fee $		4-
TOTAL FEE $		69

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date:_____ Approved by: _____

[ ] Fire Protection Plans Approved

Date:_____ Approved by: _____

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 12.1.11

Approved by: AD

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date: _____

Approved by: _____

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other _____				

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received / Control # 12/8/11

Date Issued / Permit # 11-1232

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

Block 158 Lot 6 Qualification Code

Work Site Location 1053 Lexington Dr

Owner in Fee: Robert Gentile

Tel. e-mail

Address 1053 Lexington Dr (street) Deptford (municipality) 08096 (zip code)

Contractor: Stevenson Electric Inc. Tel. (609) 267-4200

Address 205 Deacon Rd. Hainesport, NJ 08036 e-mail jeffse@comcast.net

Contractor License No. 10912 Exp. Date 2012

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

Federal Emp. ID No. FAX: (609) 267-6040

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 200

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required 11/28/11

[ ] 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. George J. Stevenson

Applicant's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Removal of existing gas Furnace
Install new 95% gas Furnace

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

Administrative Surcharge	$
Minimum Fee	$ 65
State Permit Surcharge Fee	$
TOTAL FEE	$

U.C.C. F120 (rev. 12/07) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

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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

Audubon-Cesco Corp
Garnett A. Arnold
257 W. Nicholson Road
Audubon NJ 08106

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

10/05/2011 TO 12/31/2012
VALID

13VH06480400
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs
HAS REGISTERED
Audubon-Cesco Corp
Home Improvement Contractor

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

10/05/2011 TO 12/31/2012
VALID

SIGNATURE

DIRECTOR

13VH06480400
License/Registration/Certificate #

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/ CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:

Division of Consumer Affairs
P.O. Box 46016
Newark, NJ 07101

PLEASE DETACH HERE

UPFLOW MODELS

MODEL	A	B	C	D	E	F	LEFT SIDE	RIGHT SIDE	BACK	TOP	FRONT	VENT	SHIP WGTS
04	17½	16½	15¾	2	15	13²⁵/₃₂	0	0	1	2*	2*	0	111
06	17½	16½	15¾	2	15	13²⁵/₃₂	0	0	1	2*	2*	0	117
07	17½	16½	15¾	2	15	13²⁵/₃₂	0	0	1	2*	2*	0	124
08	21	19⅞	19¼	2	18¼	17¼	0	0	1	2*	2*	0	137
10	21	19⅞	19¼	2	18¼	17¾	0	0	1	2*	2*	0	148
12	21	19⅞	19¼	2	18¼	17½	0	0	1	2*	2*	0	152

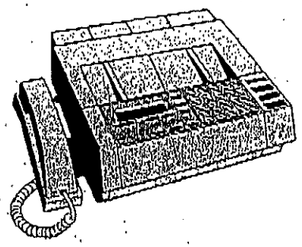
*A service clearance of at least 24 inches is recommended in front of all furnaces.

FIGURE 6
CLEARANCE TO COMBUSTIBLES, UPFLOW UNITS

Incoming Fax From

Fax 856 547-2117

AUDUBON GESCO



YOUR FRIENDLY HEATING OIL CO. SINCE 1935

SALES * SERVICE * INSTALLATION

HEATING - COOLING - HUMIDIFIERS - ELECTRONIC AIR CLEANERS

856 - 547-3000

SWIMMING POOL SERVICE & SUPPLIES

856-547-POOL (7665)

Date: 11 / 22 / 11

To: Christian J Mclaughlin

C/O _____ From: Mike Garrett

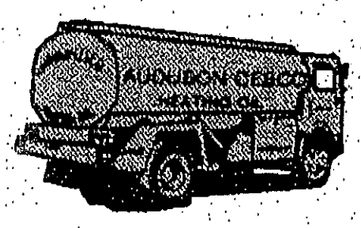
Number Of Pages Including This Cover Sheet 2

Re: Clearance chart for Robert Gentile

Heater replacement

RHEEM RGRE07

1053 Lexington Drive Deptford



257 W. Nicholson Rd. Audubon, NJ 08106

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Control # 12-841
Date Issued
Permit # 11-1232

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

Block 158 Lot 6 Qualification Code ______

Work Site Location 1053 Lexington

Owner in Fee: [illegible]

Tel. ( ) ______ e-mail ______

Address [illegible] (street) [illegible] (municipality) [illegible] (zip code)

Contractor: [illegible] Tel. ([illegible]) [illegible]

Address [illegible] e-mail ______

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

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

Fire Alarm Contractor No. ______ Exp. Date ______

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

Federal Emp. ID No ______ FAX: ( ) ______

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present ______ Proposed ______

Constr. Class: Present ______ Proposed ______

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

Fuel Type: [✓] Gas [ ] Oil [ ] Electric [ ] Solar

Other ______

Location: ______

Total Cost of Fire Protection Work $ [illegible]

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
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: ______ Approved by: ______
[ ] Fire Protection Plans Approved
Date: ______ Approved by: ______
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 12.1.11
Approved by: [illegible]
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 2-7-12
Approved by: [illegible]

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting			✓	[illegible]
Final				
Other				

Dates (Month/Day)

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 Signature
[ ] Certified Contractor [✓] [ ] Exempt Applicant

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK: Install new gas furnace

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)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
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		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fuel-Fired Appliances [ ] Gas [ ] Oil [ ] Solid		65
Fireplace Venting/Metal Chimney		
Other		

Administrative Surcharge $ ______
Minimum Fee $ ______
State Permit Surcharge Fee $ 4
TOTAL FEE $ 69

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 12/8/11 / 11-1732

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 158 Lot 6 Qualification Code

Work Site Location 1053 Lexington Dr

Owner in Fee Robert Gattis

Address 1053 Lexington Dr

Tel (

Contractor

Address

Tel ( ) FAX ( )

Contractor License No.

Federal Emp. No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date: 11-23-11

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: 2-6-12

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment			2-6-12	
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
FINAL			2-6-12	

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
+	Gas Piping	6
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
+	Other	
+	Other (Comercial)	15

Administrative Surcharge $

Minimum Fee $ 80

State Permit Surcharge Fee $

TOTAL FEE $

U.C.C. F130 (rev. 01/04)

1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

CONSTRUCTION PERMIT

Date Issued 2/24/2020
Control # 36791
Permit # 20200217

IDENTIFICATION Block: 158 Lot: 6 Qualifier
Work Site Location: 1053 LEXINGTON DR Deptford Township, NJ

Owner in Fee ELI, MORGAN
1053 LEXINGTON DR DEPTFORD NJ 08096

Telephone:

Contractor SUNTUITY SOLAR LLC
Address 2137 ROUTE 35N HOLMDEL NJ 07733

Telephone: (732) 979-2400
Lic. No. or Bldrs. Reg. No. 13VH09300100 34EB01572800
Federal Employee. No.

Is hereby granted permission to perform the following work:

- [x] BUILDING
- [ ] PLUMBING
- [ ] LEAD HAZARD ABATEMENT
- [x] ELECTRICAL
- [ ] FIRE PROTECTION
- [ ] DEMOLITION
- [ ] ELEVATOR DEVICES
- [ ] ASBESTOS ABATEMENT (Subchapter 8 only)
- [ ] OTHER

DESCRIPTION OF WORK:
SOLAR PANELS

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 $5,000

C. Parmo LLC — 2/24/2020
Construction Official — Date

PAYMENTS (Office Use Only)

Building	$200
Electrical	$200
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$10
CO Fee	
Other	$0
Total	$410
Check No.	12693
Cash	$0
Credit	$0
Collected By	Kelly Ford

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.

- [x] 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:

- [x] 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".

- [x] A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control # 20-0217
Date Issued
Permit # 2-24-2020

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

Block 138 Lot 60 Qualification Code

Work Site Location 1053 LEXINGTON DRIVE
WOODBURY NJ 08096

Owner in Fee: MORGAN LOVE

Tel. e-mail

Address 1053 Lexington Dr Wood (street, municipality)

Contractor: Suntuity Electric, LLC Tel. (732) 979-2400 (zip code)

Address 2137 Route 35 N e-mail njpermitting@suntuity.com
Holmdel, NJ 07733

Contractor License No. 34EB01572800 Exp. Date 03/31/2021

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No FAX: (732) 979-2401

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as RESIDENCE Utility Co. PSE&G

Est. Cost of Elec. Work $ 3500

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

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

[✓] Electric Plans Approved
Date: 12-9-19 Approved by: NEXT

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

SUBCODE APPROVAL for PERMIT
Date: 12-10-19
Approved by: UR

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

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
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: Vincent Vellucci

Print name here: Vincent Vellucci

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: INSTALLATION OF SOLAR PV SYSTEM

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	
0		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	
16	.240	KW ~~Transformer/Generator~~ INVERTERS	
		AMP Service	
1	60	AMP ~~Subpanel~~ SOLAR DISCONNECT	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	
1	5.040	KW PV SOLAR	200

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.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control # 20-0217

Date Issued
Permit # 2-24-2020

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

Block 158 Lot 6 Qualification Code

Work Site Location 1053 Lexington Drive
Deptford Township, NJ 08096

Owner in Fee: Morgan Eli

Tel. ___ e-mail

Address 1053 Lexington Dr (street) Deptford Township, NJ (municipality) 08096 (zip code)

Contractor: Suntuity Solar LLC Tel. 7329792400 x 7150

Address 2137 Route 35N e-mail njpermitting@suntuity.com
Holmdel, NJ 07733

Contractor License No. or Builder Registration No. 13VH09300100 Exp. Date 03/31/2020

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX: 7329792401

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[X] Exterior	12-6-19	JC
[ ] Interior		

Joint Plan Review Required:
[X] Elec. [ ] Plumb. [ ] Fire [ ] Elevator

SUBCODE APPROVAL for PERMIT
Date:
Approved by: 12-6-19 JC

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

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present ___ Proposed ___
No. of Stories
Height of Structure ___ ft.
Area — Largest Floor ___ sq. ft.
New Bldg. Area/All Floors ___ sq. ft.
Volume of New Structure ___ cu. ft.
Max. Live Load
Max. Occupancy Load

Constr. Class Present ___ Proposed ___
If Industrialized Building:
State Approved ___ HUD ___

Est. Cost of Bldg. Work:
1. New Bldg. $ 1500
2. Rehabilitation $
3. Total (1+ 2) $ 1,500

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: GV

Print name here: Wanda Irizarry

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

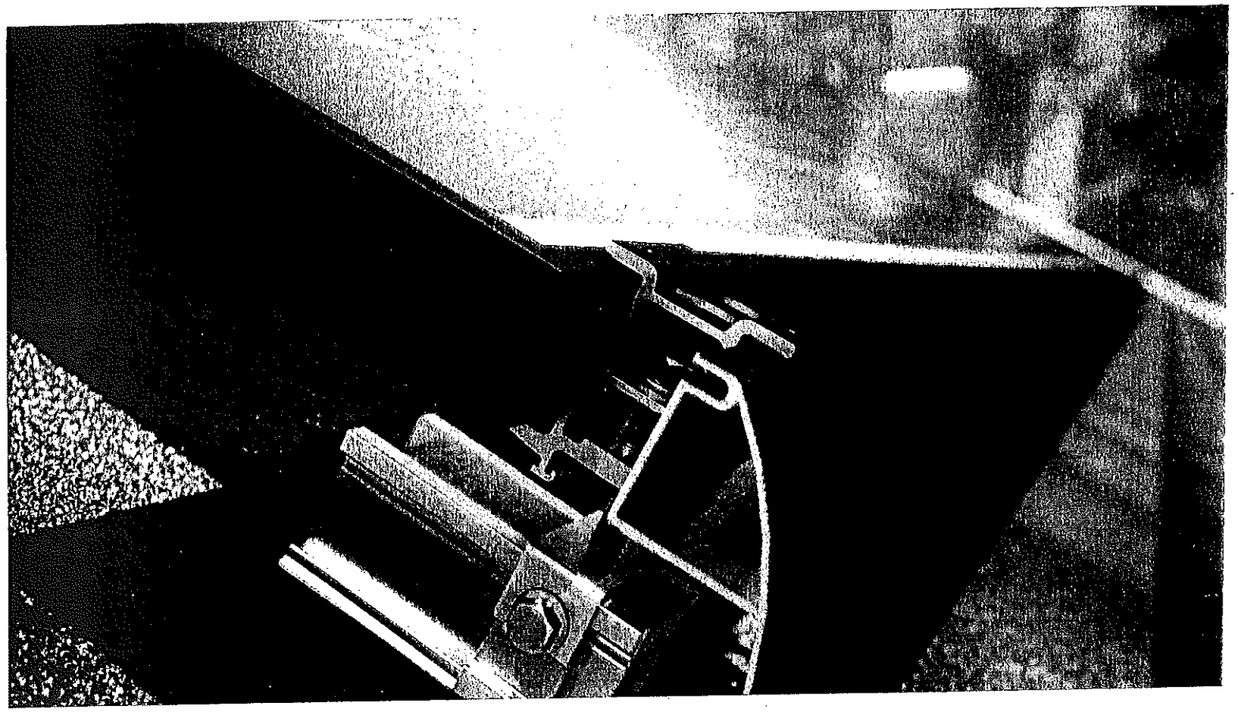
Installation of a roof mounted solar system.

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 SOLAR
[ ] Demolition

FEE (Office Use Only)
$ 200

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.



ROCK-IT SYSTEM 3.0

RAIL-FREE RACKING

UTILIZES ECOFASTEN SOLAR'S PATENTED TECHNOLOGY

EcoFasten Solar®

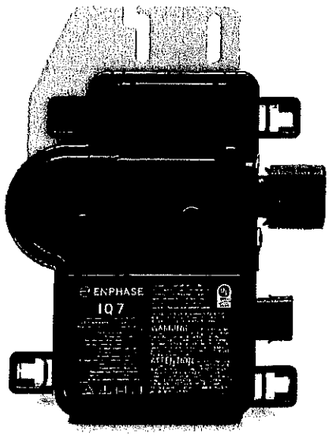
Data Sheet
Enphase Microinverters
Region: AMERICAS

Enphase IQ 7 and IQ 7+ Microinverters

The high-powered smart grid-ready **Enphase IQ 7 Micro™** and **Enphase IQ 7+ Micro™** dramatically simplify the installation process while achieving the highest system efficiency.

Part of the Enphase IQ System, the IQ 7 and IQ 7+ Microinverters integrate with the Enphase IQ Envoy™, Enphase IQ Battery™, and the Enphase Enlighten™ monitoring and analysis software.

IQ Series Microinverters extend the reliability standards set forth by previous generations and undergo over a million hours of power-on testing, enabling Enphase to provide an industry-leading warranty of up to 25 years.



Easy to Install

- Lightweight and simple
- Faster installation with improved, lighter two-wire cabling
- Built-in rapid shutdown compliant (NEC 2014 & 2017)

Productive and Reliable

- Optimized for high powered 60-cell and 72-cell* modules
- More than a million hours of testing
- Class II double-insulated enclosure
- UL listed

Smart Grid Ready

- Complies with advanced grid support, voltage and frequency ride-through requirements
- Remotely updates to respond to changing grid requirements
- Configurable for varying grid profiles
- Meets CA Rule 21 (UL 1741-SA)

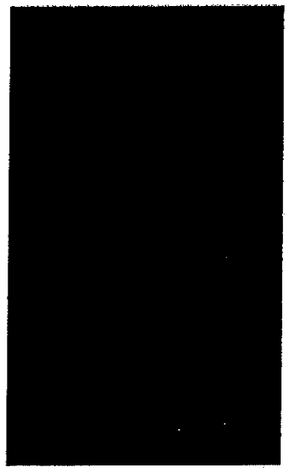
* The IQ 7+ Micro is required to support 72-cell modules.

UL CERTIFIED SAFETY US CA E361165

To learn more about Enphase offerings, visit **enphase.com**

ENPHASE.

YLM-T
60 CELL
BLACK-BLACK

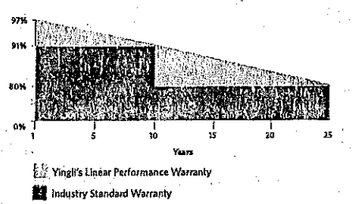


21.6%
CELL EFFICIENCY

10 YEAR
PRODUCT WARRANTY

0-5W
POWER TOLERANCE

25 Years Linear Warranty



YINGLISOLAR.COM

YINGLI SOLAR
Power Your Life

IMPROVED POWER
NEVER SETTLE FOR LESS

Choosing the best P-type monocrystalline cells, YLM series modules are making the best out of your system. Trust in the expertise of Yingli and well proven technology.

High Power Density
High conversion efficiency and more power output per square meter.

Quality
The quality and reliability of the modules is ensured by most modern production facilities, narrow tolerance limits and strict quality checks like a double 100% EL check.

Low Light Behavior
The excellent low light behaviour of less than 4% module efficiency loss at 200W/m² means higher yields and improved profitability of your system.

Current Binning
A classification of the modules based on their current reduces mismatch losses and is increasing the system perormance by up to 2%.

Performance Modelling

For those interested in obtaining panel performance modeling files for system energy yield simulation, please contact Yingli at simulation@yingliamericas.com.

Qualifications & Certificates

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 Examiners of Electrical Contractors

HAS LICENSED

SUNTUITY ELECTRIC LLC
VINCENT VELLUCCI
2137 Route 35 N.
Holmdel NJ 07733

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

03/09/2018 TO 03/31/2021
VALID

34EB01572800
LICENSE/REGISTRATION/CERTIFICATION #

Vincent Vellucci
Signature of Licensee/Registrant/Certificate Holder

ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Examiners of Electrical Contractors
HAS LICENSED
SUNTUITY ELECTRIC LLC
Electrical Business Permit

03/09/2018 TO 03/31/2021
VALID
SIGNATURE

34EB01572800
License/Registration/Certificate #
ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/ CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:
Board of Examiners of Electrical Co
P.O. Box 45006
Newark, NJ 07101

PLEASE DETACH HERE

SUNTUITY ELECTRIC LLC EXPIRATION DATE **2021**

YOUR LICENSE/REGISTRATION/CERTIFICATE NUMBER IS **34EB 01572800** . PLEASE USE IT IN ALL CORRESPONDENCE TO THE DIVISION OF CONSUMER AFFAIRS. USE THIS SECTION TO REPORT ADDRESS CHANGES. YOU ARE REQUIRED TO REPORT ANY ADDRESS CHANGES IMMEDIATELY TO THE ADDRESS NOTED BELOW.

Board of Examiners of Electrical Contractors
P.O. Box 45006
Newark, NJ 07101

PRINT YOUR NEW **ADDRESS OF RECORD** BELOW.
YOUR ADDRESS OF RECORD IS THE ADDRESS THAT WILL PRINT ON YOUR LICENSE/REGISTRATION/CERTIFICATE AND IT MAY BE MADE AVAILABLE TO THE PUBLIC.

HOME ☐
BUSINESS ☐

TELEPHONE
INCLUDE AREA CODE

PRINT YOUR NEW **MAILING ADDRESS** BELOW.
YOUR MAILING ADDRESS IS THE ADDRESS THAT WILL BE USED BY THE DIVISION OF CONSUMER AFFAIRS TO SEND YOU ALL CORRESPONDENCE.

HOME ☐
BUSINESS ☐

TELEPHONE
INCLUDE AREA CODE

If the law governing your profession requires the current license/registration/certificate to be displayed, it should be within reasonable proximity of your original license/registration/certificate at your principal office or place of business.

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
Home Improvement Contractors

HAS REGISTERED

SUNTUITY SOLAR LLC
Shadaan Javan
2137 Rt 35 N
Holmdel NJ 07733 .

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

02/06/2019 TO 03/31/2020
VALID

13VH09300100
LICENSE/REGISTRATION/CERTIFICATION #

Shadaan Javan
Signature of Licensee/Registrant/Certificate Holder

Paul Rodriguez
ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Home Improvement Contractors
HAS REGISTERED
SUNTUITY SOLAR LLC
Home Improvement Contractor

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE
02/06/2019 TO 03/31/2020
VALID
SIGNATURE
13VH09300100
License/Registration/Certificate #
ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/ CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:
Home Improvement Contractors
P.O. Box 45016
Newark, NJ 07101

PLEASE DETACH HERE

SUNTUITY SOLAR LLC EXPIRATION DATE **2020**

YOUR LICENSE/REGISTRATION/CERTIFICATE NUMBER IS **13VH 09300100** . PLEASE USE IT IN ALL CORRESPONDENCE TO THE DIVISION OF CONSUMER AFFAIRS. USE THIS SECTION TO REPORT ADDRESS CHANGES. YOU ARE REQUIRED TO REPORT ANY ADDRESS CHANGES IMMEDIATELY TO THE ADDRESS NOTED BELOW.

Home Improvement Contractors
P.O. Box 45016
Newark, NJ 07101

PRINT YOUR NEW **ADDRESS OF RECORD** BELOW
YOUR ADDRESS OF RECORD IS THE ADDRESS THAT WILL PRINT ON YOUR LICENSE/REGISTRATION/CERTIFICATE AND IT MAY BE MADE AVAILABLE TO THE PUBLIC

HOME ☐
BUSINESS ☐

TELEPHONE
INCLUDE AREA CODE

PRINT YOUR NEW **MAILING ADDRESS** BELOW.
YOUR MAILING ADDRESS IS THE ADDRESS THAT WILL BE USED BY THE DIVISION OF CONSUMER AFFAIRS TO SEND YOU ALL CORRESPONDENCE.

HOME ☐
BUSINESS ☐

TELEPHONE
INCLUDE AREA CODE

If the law governing your profession requires the current license/registration/certificate to be displayed, it should be within reasonable proximity of your original license/registration/certificate at your principal office or place of business.

BUILDING SUBCODE
TECHNICAL SECTION

Date Received
Control # 20-0217
Date Issued
Permit # 2-24-2020

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

Block 158 Lot 6 Qualification Code

Work Site Location 1053 Lexington Drive
Deptford Township, NJ 08096

Owner in Fee: Morgan Eli

Tel. e-mail

Address 1053 Lexington Dr (street) Deptford Township, NJ (municipality) 08096 (zip code)

Contractor: Suntuity Solar LLC Tel. 7329792400 x 7150

Address 2137 Route 35N e-mail njpermitting@suntuity.com
Holmdel, NJ 07733

Contractor License No. or Builder Registration No. 13VH09300100 Exp. Date 03/31/2020

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX: 7329792401

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footings/Foundations		
[ ] Structural/Framework		
[X] Exterior	12-6-19	SC
[ ] Interior		
Joint Plan Review Required:		
[X] Elec. [ ] Plumb. [ ] Fire [ ] Elevator		
SUBCODE APPROVAL for PERMIT		
Date:		
Approved by:	12-6-19	SC
SUBCODE APPROVAL for CERTIFICATE		
[ ] CO [ ] CCO [X] CA		
Date:		
Approved by:	9-4-20	SC

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Footing				
Footing Bonding				
Foundation				
Slab				
Frame				
Truss Sys./Bracing				
Barrier-Free				
Insulation				
Finishes -Base Layer				
Finishes -Final				
Energy				
Mechanical				
TCO				
Other				
Final			9-4-20	SC
Barrier-Free				

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ ft.
Area — Largest Floor _____ sq. ft.
New Bldg. Area/All Floors _____ sq. ft.
Volume of New Structure _____ cu. ft.
Max. Live Load _____
Max. Occupancy Load _____

Constr. Class Present _____ Proposed _____
If Industrialized Building:
State Approved _____ HUD _____

Est. Cost of Bldg. Work:
1. New Bldg. $ 1500
2. Rehabilitation $ _____
3. Total (1+ 2) $ 1,500

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: GW

Print name here: Wanda Irizarry

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Installation of a roof mounted solar system.

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 SOLAR
[ ] Demolition

FEE (Office Use Only)
$ 200

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

Date Received
Control # 20-0217
Date Issued
Permit # 2-24-2020

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

Block 138 Lot 6 Qualification Code

Work Site Location 1053 Lexington Drive
Woodbury NJ 08096

Owner in Fee: Morgan Love

Tel. ___ e-mail

Address 1053 Lexington Dr Wood (street) (municipality)

Contractor: Suntuity Electric, LLC Tel. (732) 979-2400 (zip code)

Address 2137 Route 35 N e-mail njpermitting@suntuity.com
Holmdel, NJ 07733

Contractor License No. 34EB01572800 Exp. Date 03/31/2021

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No FAX: (732) 979-2401

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Residence Utility Co. PSEG

Est. Cost of Elec. Work $ 3500

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

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

[ ] Electric Plans Approved
Date 12-9-19 Approved by: MLN

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

SUBCODE APPROVAL for PERMIT
Date: 12-10-19
Approved by: QR

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: ___
Approved by: QR

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			9-3	MH
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

9-3 WORK WAS NEVER DONE

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: Vincent Vellucci

Print name here: Vincent Vellucci

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
INSTALLATION OF SOLAR PV SYSTEM

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	
___			
0		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	
16	.240	KW ~~Transformer/Generator~~ INVERTERS	
___	___	AMP Service	
1	60	AMP ~~Subpanels~~ SOLAR DISCONNECT	
___	___	AMP Motor Control Center	
___	___	KW Elec. Sign/Outline Light	
1	5.040	KW PV SOLAR	200

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

Permit Update

Date Received: update
Control #: 37370
Date Issued:
Permit #: 20-02174

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

Block 158 Lot 6 Qualification Code

Work Site Location 1053 Lexington Drive
Woodbury NJ 08096

Owner in Fee: Morgan Love

Tel. e-mail

Address 1053 Lexington Drive Woodbury NJ 08096
street municipality zip code

Contractor: Suntuity Electric, LLC Tel. (732) 979-2400

Address 2137 Route 35 N e-mail njpermitting@suntuity.com
Holmdel, NJ 07733

Contractor License No. 34EB01572800 Exp. Date 03/31/2021

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No FAX: (732) 979-2401

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Residential Utility Co. PSE&G

Est. Cost of Elec. Work $ 1000.00

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: Vincent Vellucci

Print name here: Vincent Vellucci

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
(N) 200 amp 20/40 MSP with 225 amp Busbar Upgrade

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	
0		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	
1	200	AMP Service Panels Main	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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: 9-3-20
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			9-3	
Barrier-Free				

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

9-3 SERVICE WAS NEVER INSTALLED

Administrative Surcharge	$ 15
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.

PERMIT UPDATE

Date Update Issued 4/24/2020
Control # 37370
Permit # 20200217+A

IDENTIFICATION Block: 158 Lot: 6 Qualifier
Work Site Location: 1053 LEXINGTON DR Deptford Township, NJ
Contractor SUNTUITY SOLAR LLC
Address 2137 ROUTE 35N HOLMDEL, NJ 07733

Owner in Fee ELI, MORGAN
1053 LEXINGTON DR DEPTFORD NJ 08096
Telephone: (732) 979-2400
Lic. No. or Bldrs. Reg. No. 13VH09300100 34EB01572800
Federal Employee. No.

Telephone:

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 REVISION SOLAR REVISION ELECTRIC

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 $1,000

C. Rom III — Construction Official

4/24/2020 — Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$65
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$2
CO Fee	
Other	$0
Total	$67
Check No.	13008
Cash	$0
Credit	$0
Collected By	Kelly Ford

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.

ELECTRICAL SUBCODE
TECHNICAL SECTION

RECEIVED Permit Update

MAR 16 2020

CONSTRUCTION
DEPTFORD TOWNSHIP

Date Received: update
Control #: 31370
Date Issued
Permit #: 20-0217A

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

Block 158 Lot 6 Qualification Code

Work Site Location 1053 Lexington Drive Woodbury NJ 08096

Owner in Fee: Morgan Love

Tel. e-mail

Address 1053 Lexington Drive (street) Woodbury (municipality) NJ 08096 (zip code)

Contractor: Suntuity Electric, LLC Tel. (732) 979-2400

Address 2137 Route 35 N e-mail njpermitting@suntuity.com
Holmdel, NJ 07733

Contractor License No. 34EB01572800 Exp. Date 03/31/2021

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 3 FAX: (732) 979-2401

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Residence Utility Co. PSE&G

Est. Cost of Elec. Work $ 1000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] 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: 4-3-20
Approved by:

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

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
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: Vincent Vellucci

Print name here: Vincent Vellucci

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
(N) 200 amp 20/40 MSP with 225 amp Busbar Upgrade

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	
0		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	
1	200	AMP Service Panel Main	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $
Minimum Fee $ 65-
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.

Thomas W. Gillis , AIA, NACRB, LEED AP
11 Billingsport Drive Sicklerville, NJ 08081
• t: 856.725.5770 • w: gillisdesigngroup.com • e: tomwgillis@gmail.com

November 19, 2019

Structural framing analysis and review of roof top solar system Installation for:

FILE COPY

Morgan Love
1053 Lexington Drive, Woodbury, NJ 08096
System Size: 5.04 kW

To Whom It May Concern, please note that the structure for the building has been evaluated for the additional load of solar panels to be place in service and found to be acceptable. The roof framing was found to be constructed of 2x8 roof joists @ 16" on center with collar ties and ½" plywood sheathing and asphalt shingles. The additional solar panel load to the building's roof has been calculated to be 2.34 lbs. per sq. foot. The new superimposed load is under the recommended not to exceed maximum of 4 lbs. per. sq. ft. thus making the roof capable of supporting the additional load.

Load tabulation for residence:
Roof joists, 2x8 joists @ 16" o.c. w/ collar ties & ½" plywood sheathing w/ shingle roofing.
16 Yingli 315 w solar panels with a weight 41.2 lbs. ea. = 659.2 lbs.
Panel area 17.604 sq.ft. per. panel = 281.66 sq.ft.
Distributed load = total panel weight / total panel area = 659.2 / 281.66 = 2.34 lbs. per. sq.ft.
Wind 115 mph cat 2
Snow 20 lbs./ sq.ft.

Reference Codes: 2015 International Building Code NJ ed., American Society of Civil Engineers (ASCE/SEI 7-05, 7-10) National Design Spec. for Wood Constr. (NDS latest edition)

Should you have any questions please contact our office.

Sincerely,

Thomas W. Gillis, AIA, NCARB, LEED AP.
NJ. Lic. # 18347: exp. 7/31/2021

ZONING PERMIT APPLICATION

Deptford Township
1011 Cooper Street
Deptford, New Jersey 08096
Phone # (856) 845-5300
Fax # (856) 845-8995
www.deptford-nj.org

PLEASE PRINT 11-22

APPLICANT INFORMATION					
Last Name	Irizarry	First	Warck		
Company Name	Sunfinity Solar LLC				
Street Address	2137 Rt 35 N			Apartment/Unit #	
City	Holmdel	State	NJ	ZIP	07733
Phone	732-979-2400 X7150	Email Address	njpermitting@Sunfinity.com		

OWNER INFORMATION	
Name	Morgan LOVE
Address	1053 Lexington Drive Woodbury NJ 08096

SUBJECT PROPERTY							
Address	1053 Lexington Drive			Block	158	Lot(s)	6
Zone	R-10	Plate		Is property covered by Home Owners Association?	Yes ☐ No ☒	If "Yes" attach HOA approval.	
Has there been any appeal, request or application to any Township Boards regarding this application?					Yes ☐ No ☐	If "Yes" attach approval.	

TYPE OF DEVELOPMENT							
New Construction ☐	Addition ☐	Garage ☐	Fence ☐	Pool ☐	Temporary Sign/Banner ☐	Sign ☐	Use Permit ☐
Other ☒	Solar - Residential						
Descriptions of work (give dimensions, describe materials, etc.)							
Installation of a Roof mounted PV Solar System							

SETBACKS							
Front		Rear		Side		Side	
Street frontage		Lot depth		Building height		Other	

I swear that the above application is true and correct to the best of my knowledge.

SIGNATURE OF APPLICANT — DATE OF APPLICATION: 11.19.2019

FOR OFFICE USE ONLY			
Date received	11-21-19	By	Gayle
TAXES			
Current ✓		Delinquent	
FOR ZONING OFFICIAL USE ONLY			
Approved	✓	Denied	

ZONING PERMIT APPROVED

ZONING OFFICER

MUST SECURE NECESSARY CONSTRUCTION PERMITS

HIGH TEMP 2% AVG	33° C
EXTREME MIN TEMP	-15° C

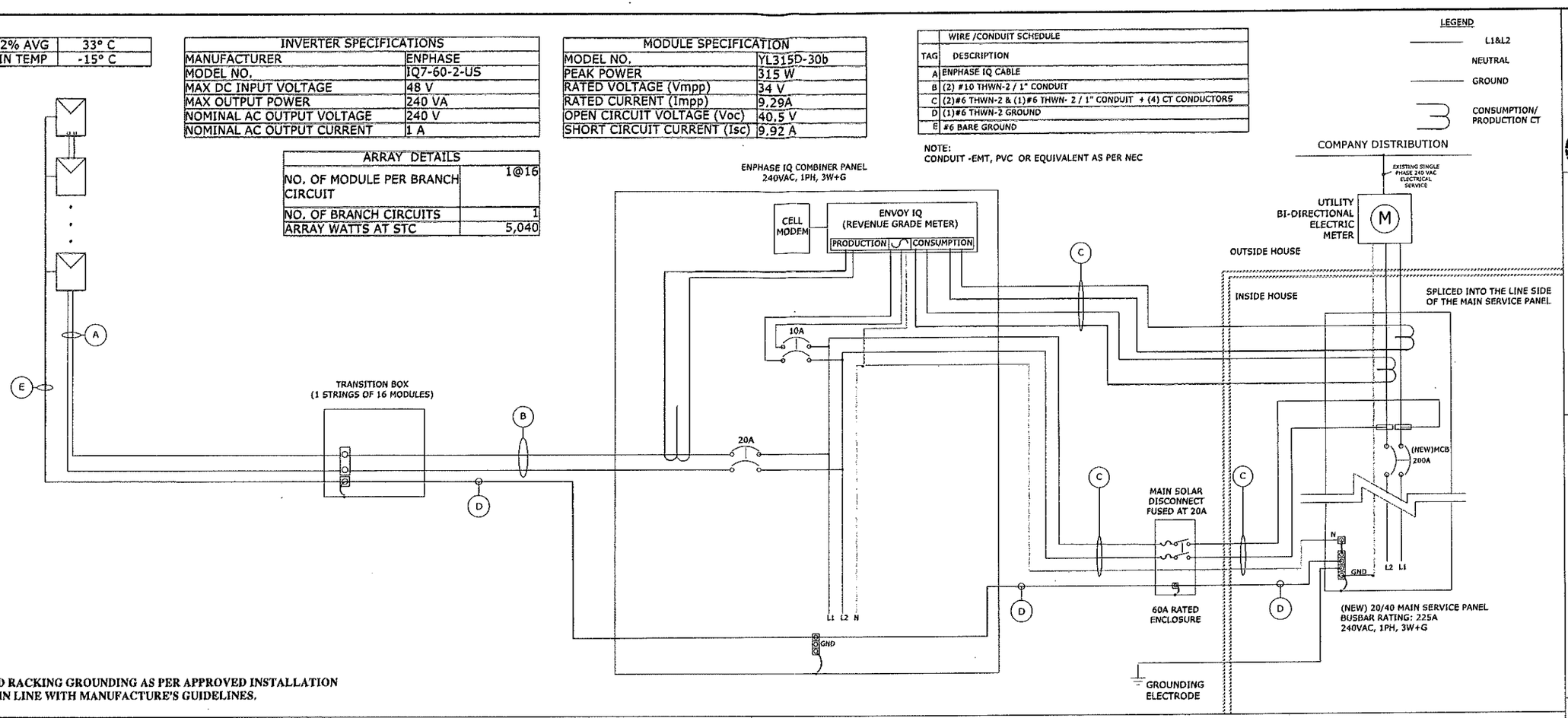
INVERTER SPECIFICATIONS	
MANUFACTURER	ENPHASE
MODEL NO.	IQ7-60-2-US
MAX DC INPUT VOLTAGE	48 V
MAX OUTPUT POWER	240 VA
NOMINAL AC OUTPUT VOLTAGE	240 V
NOMINAL AC OUTPUT CURRENT	1 A

MODULE SPECIFICATION	
MODEL NO.	YL315D-30b
PEAK POWER	315 W
RATED VOLTAGE (Vmpp)	34 V
RATED CURRENT (Impp)	9.29A
OPEN CIRCUIT VOLTAGE (Voc)	40.5 V
SHORT CIRCUIT CURRENT (Isc)	9.92 A

ARRAY DETAILS	
NO. OF MODULE PER BRANCH CIRCUIT	1@16
NO. OF BRANCH CIRCUITS	1
ARRAY WATTS AT STC	5,040

WIRE /CONDUIT SCHEDULE	
TAG	DESCRIPTION
A	ENPHASE IQ CABLE
B	(2) #10 THWN-2 / 1" CONDUIT
C	(2)#6 THWN-2 & (1)#6 THWN- 2 / 1" CONDUIT + (4) CT CONDUCTORS
D	(1)#6 THWN-2 GROUND
E	#6 BARE GROUND

NOTE:
CONDUIT -EMT, PVC OR EQUIVALENT AS PER NEC



NOTES:
PV MODULE AND RACKING GROUNDING AS PER APPROVED INSTALLATION PRACTICE AND IN LINE WITH MANUFACTURE'S GUIDELINES.

GENERAL ELECTRICAL NOTES:

1. EQUIPMENT USED SHALL BE NEW AND "UL" LISTED AND SHALL BE INSTALLED AS PER MANUFACTURERS INSTALLATION MANUAL.
2. EQUIPMENT SHALL BE INSTALLED PROVIDING ADEQUATE PHYSICAL WORKING SPACE AROUND THE EQUIPMENT AND SHALL COMPLY WITH NEC.
3. PHOTOVOLTAIC POWER SYSTEMS SHALL BE PERMITTED TO OPERATE WITH UNGROUNDED PHOTOVOLTAIC SOURCE AND OUTPUT CIRCUIT AS PER NEC 690.35.
4. COPPER CONDUCTORS SHALL BE USED AND SHALL BE SIZED NOT TO EXCEED THE TEMPERATURE RATING OF THEIR INSULATION OR OF THE EQUIPMENT TO WHICH THEY ARE CONNECTED.
5. CONDUCTORS SHALL BE SIZED IN ACCORDANCE TO NEC. CONDUCTORS AMPACITY SHALL BE DE-RATED FOR TEMPERATURE CHANGE, CONDUIT FILL AND VOLTAGE DROP.
6. ALL EQUIPMENT INSTALLED OUTDOORS SHALL HAVE A NEMA 3R RATING.
7. EXPOSED NON-CURRENT CARRYING METAL PARTS SHALL BE GROUNDED AS PER NEC 690.43.
8. LOAD / LINE SIDE INTER-CONNECTION SHALL COMPLY WITH NEC.
9. ALL SOLAR SYSTEM LOAD CENTERS TO CONTAIN ONLY GENERATION CIRCUITS AND NO UNUSED POSITIONS OR LOADS.
10. PV SYSTEM CIRCUITS INSTALLED ON OR IN BUILDINGS SHALL INCLUDE A RAPID SHUTDOWN FUNCTION THAT CONTROLS SPECIFIC CONDUCTORS IN ACCORDANCE WITH NEC 690.12(1) THROUGH (5)
11. ALL CURRENT CARRYING CONDUCTORS SHALL BE PROTECTED BY CONDUIT WHERE EXPOSED TO SUNLIGHT.
12. FLEXIBLE CONDUIT SHALL NOT BE INSTALLED ON ROOFTOP. FLEXIBLE CONDUIT / NM CABLE SHALL BE USED INSIDE THE ATTIC IF REQUIRED.
13. CONDUIT TYPE / SIZE SHALL BE CHOSEN BY THE INSTALLATION CONTRACTOR TO MEET OR EXCEED NEC AND LOCAL REQUIREMENTS.
14. ALL PORTIONS OF THE PHOTOVOLTAIC SYSTEM SHALL BE MARKED CLEARLY IN ACCORDANCE WITH NEC ARTICLE 690.
15. THE ENPHASE MICROINVERTER MODEL IQ 7 DO NOT REQUIRE GROUNDING ELECTRODE CONDUCTORS (GEC) OR EQUIPMENT GROUNDING CONDUCTORS (EGC). THE MICROINVERTER HAS A CLASS II DOUBLE-INSULATED RATING, WHICH INCLUDES GROUND FAULT PROTECTION (GFP).
16. CT CONDUCTORS TO BE INSTALLED AS PER MANUFACTURER'S INSTALLATION GUIDELINES.DO NOT TRIM CT CONDUCTORS

CALCULATIONS:

1. CURRENT CARRYING CONDUCTOR

(A) BEFORE IQ COMBINER PANEL
AMBIENT TEMPERATURE - (33+22)°C= 55°C ...NEC 310.15(B)(3)(c)
TEMPERATURE DERATE FACTOR - 0.76 ...NEC 310.15(B)(2)(a)
GROUPING FACTOR -1...NEC 310.15(B)(3)(a)

CONDUCTOR AMPACITY
= (INV O/P CURRENT) x 1.25 / A.T.F / G.F ...NEC 690.8(B)
= [(16 x 1) x 1.25] / 0.76/ 1
= 26.31A
SELECTED CONDUCTOR - #10 THWN-2 ...NEC 310.15(B)(16)

(B) AFTER IQ COMBINER PANEL
TEMPERATURE DERATE FACTOR - 0.96
GROUPING FACTOR - 1

CONDUCTOR AMPACITY
= (TOTAL INV O/P CURRENT) x 1.25 / 0.96 / 1 ...NEC 690.8(B)
= [(16x 1) x 1.25] / 0.96 / 1
= 20.83A
SELECTED CONDUCTOR - #6 THWN-2 ...NEC 310.15(B)(16)

2. PV OVER CURRENT PROTECTION ...NEC 690.9(B)
= TOTAL INVERTER O/P CURRENT x 1.25
= (16x 1) x 1.25 =20A
SELECTED OCPD = 20A

PROPOSED SYSTEM SPECIFICATIONS:
SYSTEM SIZE: DC SIZE: 5.040 KWP/AC SIZE: 3.84 KWP
MODULE USED: YINGLI 315 W MONO PANEL: QTY (16)
16 PANELS ON ROOF AT 18° PITCH, 180° AZIMUTH (TRUE)
BRANCH CIRCUIT: 1 CIRCUIT OF 16 MODULES
INVERTER USED : ENPHASE IQ7 MICRO-INVERTER (16)

FILE COPY

Suntuity
2137 Route 35
Holmdel, NJ 07733
Tel: (732) 979-2400
Fax: (732) 979-2401

Morgan Love/Morgan Eli
1053 Lexington Dr
Deptford Township,
NJ 08096 USA
(Lat , Long : 39.834281, -75.122811)

SIGN: Vincent Vellucci
NAME: VINCENT VELLUCCI
Electric #34EB01572800
DATE:

REVISIONS

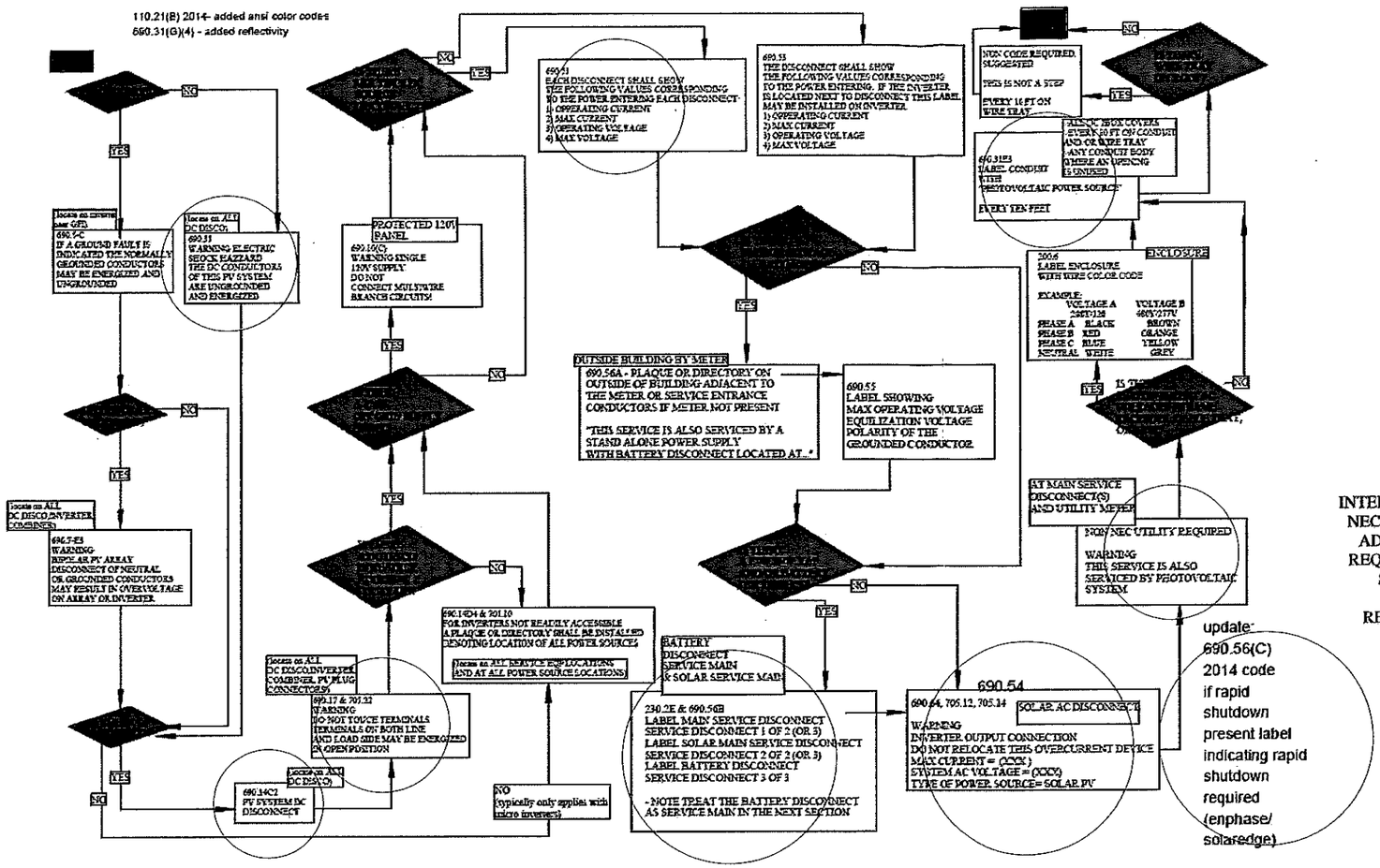
REV	DESCRIPTION	DRW BY	REV BY	DATE
1	REVISED WITH NEW MAIN SERVICE PANEL (200A MCB & 225A BUSBAR)	VIVEK	BHAVESH	12/11/2020

DRAWING TITLE
ELECTRICAL LINE DIAGRAM

DATE DRAWN	11/14/2019
DRAWN BY	VIVEK
REVIEWED BY	BHAVESH

DRAWING NO.
PV-4.0

110.21(B) 2014- added ansi color codes
690.31(G)(4) - added reflectivity



INTERPRETATION OF NEC LABEL CODE - ADD LABELS AS REQUIRED WHERE SHOWN BY CIRCLING REQUIREMENT

SOLAR AC DISCONNECT LABELS

NOTICE
AC VOLTAGE = 240V
MAX FUSE: 20A
MAX CURRENT: 20A

NOTICE
RAPID SHUTDOWN DISCONNECT SWITCH

WARNING
THIS IS MAIN 2 OF 2 WITH MAIN 1 OF 2 LOCATED INSIDE

CONDUIT LABELS

CAUTION
PHOTOVOLTAIC AC SOURCE

AC COMBINER LABELS

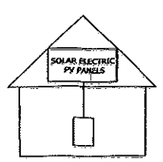
2137 ROUTE 35
HOLMDEL, NJ 07733
TEL: (732) 979-2400
www.suntuity.com

NOTICE
THIS SYSTEM IS EQUIPPED WITH RAPID SHUTDOWN ROOFTOP INVERTERS WILL DE-ENERGISE AT SERVICE PANEL OUTAGE

NOTICE
AC COMBINER AND DATA AQUISITION.
DO NOT ADD LOADS.
DO NOT TOUCH TERMINALS.
LINE AND LOAD SIDE MAY BE ENERGIZED IN OPEN POSITION.

SOLAR PV SYSTEM EQUIPPED WITH RAPID SHUTDOWN

TURN RAPID SHUTDOWN SWITCH TO THE "OFF" POSITION TO SHUTDOWN PV SYSTEM AND REDUCE SHOCK HAZARD IN ARRAY



UTILITY METER

WARNING
⚠ DUAL POWER SOURCE ⚠

SERVICE PANEL LABEL

WARNING
THIS IS MAIN 1 OF 2 WITH MAIN 2 OF 2 LOCATED OUTSIDE
THIS SERVICE IS ALSO SERVED BY A PV SYSTEM WITH RAPID SHUTDOWN. INVERTERS LOCATED ON ROOF AUTO DE-ENERGISE WHEN SOLAR SERVICE MAIN IS IN OPEN POSITION.
THE DC CONDUCTORS OF THE PV SYSTEM ARE UNGROUNDED AND MAY BE ENEGIZED.
IF BACKFEED BREAKER PRESENT DO NOT RELOCATE THIS OVERCURRENT DEVICE.

CAUTION
DO NOT DISCONNECT UNDER LOAD

Suntuity
2137 Route 35
Holmdel, NJ 07733
Tel: (732) 979-2400
Fax: (732) 979-2401

Morgan Love/Morgan Eli
1053 Lexington Dr
Deptford Township,
NJ 08096 USA
(Lat , Long : 39.834281, -75.122811)

SIGN: Vincent Velluccci
NAME: VINCENT VELLUCCI
ELECTRIC #34EB0157800
DATE:

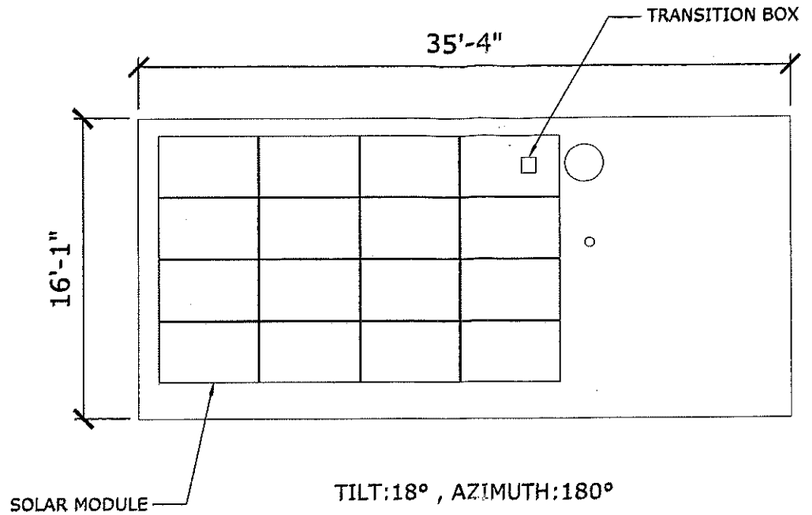
REV	DESCRIPTION	DATE	DRW BY	REV BY
1	REVISED WITH NEW MAIN SERVICE PANEL (200A MCB & 225A BUSBAR)	03/11/2020	VIVEK	BHAVESH

REVISIONS

DRAWING TITLE
LABELS

DATE DRAWN	11/14/2019
DRAWN BY	VIVEK
REVIEWED BY	BHAVESH

DRAWING NO.
PV-5.0



TILT:18° , AZIMUTH:180°

FILE COPY

PLAN REVIEW # _____

FIRE _____

ELECTRIC M. Haugaard 12-9-19

PLUMBING _____

BUILDING JOHN, C 12-6-19

CONSTRUCTION OFFICIAL _____

NAME _____

DATE _____

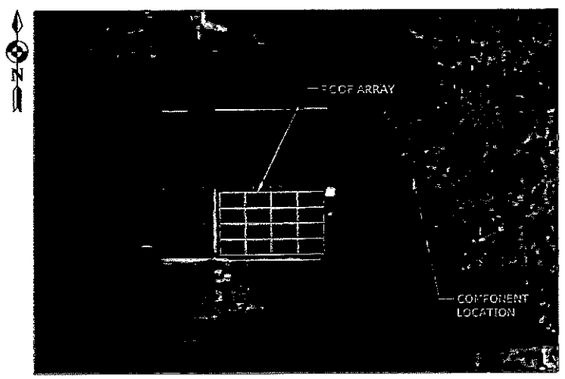
WIND SPEED	**115 MPH**
SNOW LOAD	**20 LB/SQ.FT.**

TABLE OF CONTENT	
NO.	TITLE
PV – 1.0	ARRAY LAYOUT
PV – 2.0	RACKING LAYOUT
PV – 3.0	STRUCTURAL
PV – 4.0	ELECTRICAL LINE DIAGRAM
PV – 5.0	LABELS
ATTACHMENT	DATASHEETS

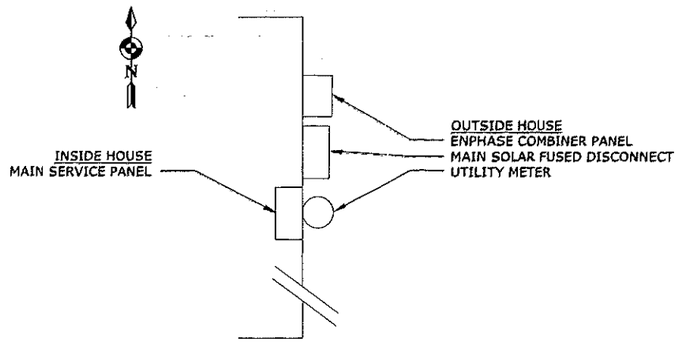
Reference Codes: IBC-2018-W/NJ EDITION, NEC-2017
Building Usage = R - RESIDENTIAL,
Construction = 5-B UNPROTECTED

ROOF ARRAY

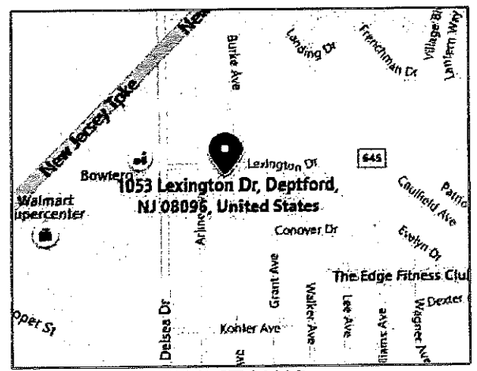
NOTE
1) THE EXISTING ROOF STRUCTURE HAS BEEN EVALUATED FOR THE PROPOSED NEW SOLAR LOAD AND DETERMINED TO BE OF SUFFICIENT CAPACITY TO INSTALL THE PROPOSED SOLAR ARRAY AS FOLLOWS:
A) SHINGLE ROOF - MECHANICALLY FASTENED PV SYSTEM NOT TO EXCEED WEIGHT OF 4.0 LBS./SQ.FT.
B) SEE STRUCTURAL SECTION FOR FRAMING UPGRADES IF REQUIRED.



SITE MAP (N.T.S)



COMPONENT LOCATION



VICINITY MAP

PROPOSED SYSTEM SPECIFICATIONS:
SYSTEM SIZE: DC SIZE: 5.040 KWP/AC SIZE: 3.84 KWP
MODULE USED: YINGLI 315 W MONO PANEL: QTY (16)
16 PANELS ON ROOF AT 18° PITCH, 180° AZIMUTH (TRUE)
BRANCH CIRCUIT: 1 CIRCUIT OF 16 MODULES
INVERTER USED : ENPHASE IQ7 MICRO-INVERTER (16)
RACKING: ECOFASTEN ROCK-IT
FLASHING:COMPOSITION SHINGLE FLASHING

ELECTRICAL SPECIFICATIONS:
SERVICE PANEL DETAILS: 150A MCB WITH 150A BUSBAR RATING
INTERCONNECTION METHOD: LINE-SIDE TAP
PV OCPD SIZE: 60A AC DISCONNECT WITH 20A FUSES

ROOF SPECIFICATIONS:
ROOF TYPE: ASPHALT SHINGLE
ROOF CONDITION: GOOD
RE-ROOFING: NO
RAFTERS: 2x8 @ 16" O.C.
SHEATHING: 1/2 PLYWOOD WITH ASPHALT SHINGLES

NOTE: THE PROPOSED ARRAY LAYOUT SHOWN IS DESIGNED TO FIT EXISTING CONDITIONS AS THEY ARE DESCRIBED IN THE DRAWING. KWP AND MODULE QUANTITY, TYPE AND LAYOUT ARE SUBJECTED TO CHANGE BASED ON SUNTUITY VERIFICATION OF ACTUAL SITE CONDITIONS, AS WELL AS ON MODULE AVAILABILITY ON THE DATE OF THE ORDER.

Suntuity
2137 Route 35
Holmdel, NJ 07733
Tel: (732) 979-2400
Fax: (732) 979-2401

Morgan Love/Morgan Eli
1053 Lexington Dr
Deptford Township,
NJ 08096 USA
(Lat , Long : 39.8342281, -75.1228111)

THOMAS W. GILLIS, R.A.
N.J. LIC.No. 1834700

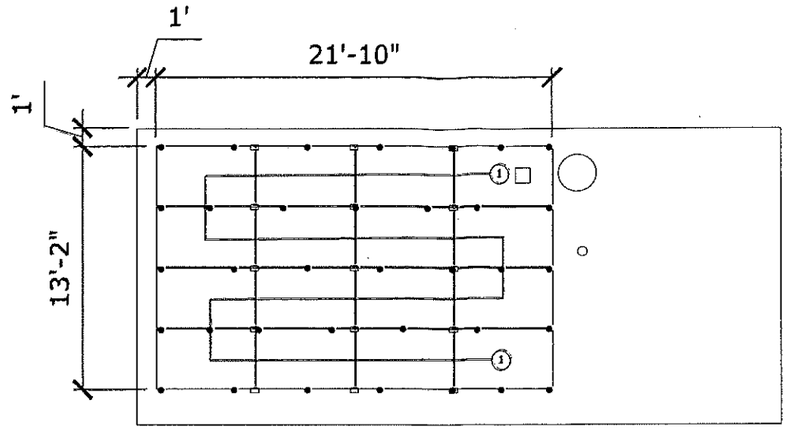
SIGN:
NAME:
DATE:

REVISIONS			
REV	DESCRIPTION	DATE	DRW BY

DRAWING TITLE
ARRAY LAYOUT

DATE DRAWN	11/14/2019
DRAWN BY	VIVEK
REVIEWED BY	BHAVESH

DRAWING NO.
PV–1.0



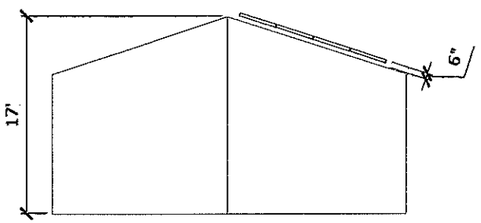
TILT:18° , AZIMUTH:180°

RACKING LAYOUT

LEGEND

- □ = TRANSITION BOX
- ● = MOUNT
- □ = COUPLING
- ○—○ = STRING/BRANCH CIRCUIT

NOTE
1) SOLAR PANEL LAYOUT SUBJECT TO FIELD ADJUSTMENT DEPENDING ON CLASH WITH ROOF OBJECTS,MAX VERTICAL AND HORIZONTAL STANDOFF SPACING AS PER STRUCTURAL ANALYSIS, MUST BE MAINTAINED AND NOT SUBJECT TO CHANGES.



HEIGHT FROM GROUND LEVEL TO PEAK OF ROOF
(SCALE:N.T.S)

PROPOSED SYSTEM SPECIFICATIONS:
SYSTEM SIZE: DC SIZE: 5.040 KWP/AC SIZE: 3.84 KWP
MODULE USED: YINGLI 315 W MONO PANEL: QTY (16)
16 PANELS ON ROOF AT 18° PITCH, 180° AZIMUTH (TRUE)
BRANCH CIRCUIT: 1 CIRCUIT OF 16 MODULES
INVERTER USED : ENPHASE IQ7 MICRO-INVERTER (16)
RACKING: ECOFASTEN ROCK-IT
FLASHING:COMPOSITION SHINGLE FLASHING

ELECTRICAL SPECIFICATIONS:
SERVICE PANEL DETAILS: 150A MCB WITH 150A BUSBAR RATING
INTERCONNECTION METHOD: LINE-SIDE TAP
PV OCPD SIZE: 60A AC DISCONNECT WITH 20A FUSES

ROOF SPECIFICATIONS:
ROOF TYPE: ASPHALT SHINGLE
ROOF CONDITION: GOOD
RE-ROOFING: NO
RAFTERS: 2x8 @ 16" O.C.
SHEATHING: 1/2 PLYWOOD WITH ASPHALT SHINGLES

NOTE: THE PROPOSED ARRAY LAYOUT SHOWN IS DESIGNED TO FIT EXISTING CONDITIONS AS THEY ARE DESCRIBED IN THE DRAWING. KWP AND MODULE QUANTITY, TYPE AND LAYOUT ARE SUBJECTED TO CHANGE BASED ON SUNTUITY VERIFICATION OF ACTUAL SITE CONDITIONS, AS WELL AS ON MODULE AVAILABILITY ON THE DATE OF THE ORDER.

Suntuity
2137 Route 35
Holmdel, NJ 07733
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Morgan Love/Morgan Eli
1053 Lexington Dr
Deptford Township,
NJ 08096 USA
(Lat , Long : 39.834281, -75.122811)

THOMAS W. GILLIS, R.A.
N.J. LIC.No. 18347OO

SIGN:
NAME:
DATE:

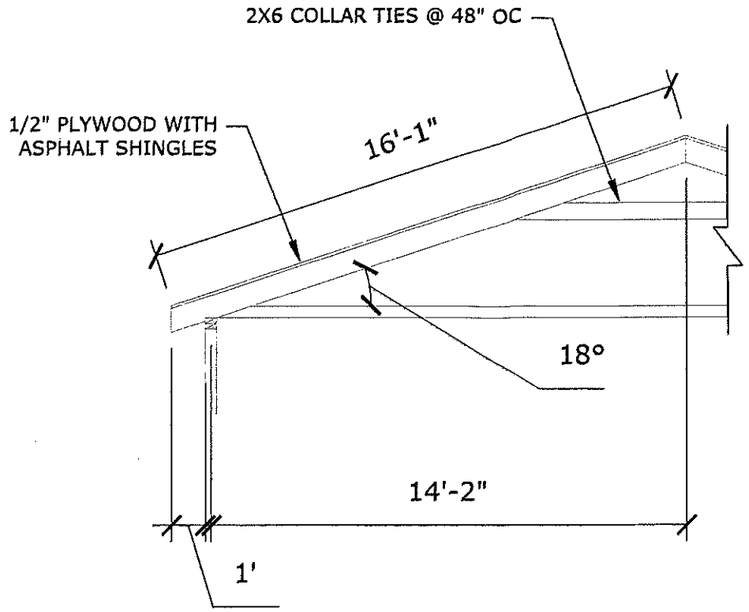
REVISIONS

REV	DESCRIPTION	DATE	DRW BY	REV BY

DRAWING TITLE
RACKING LAYOUT

DATE DRAWN	11/14/2019
DRAWN BY	VIVEK
REVIEWED BY	BHAVESH

DRAWING NO.
PV–2.0



ROOF : ATTIC (2x8 16" O.C.)

GENERAL NOTES

1. SOLAR PANELS SHALL NOT EXCEED ANY PART OF ROOF EDGE OR PEAK.

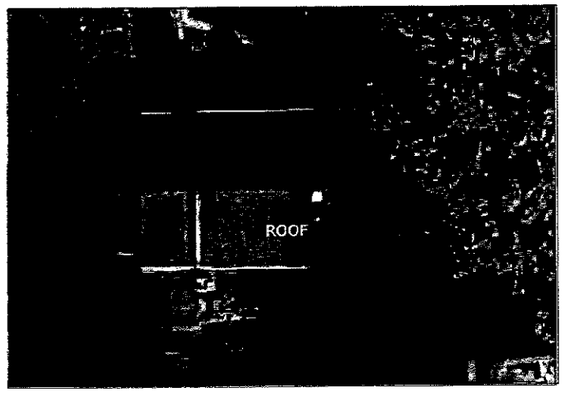
MODULE SPECIFICATION	
MODEL	YL315D-30b
FORMAT	64.56" ~ 39.05" ~ 1.37" (INCLUDING FRAME)
WEIGHT	40.78 LBS

PV MODULE
WEIGHT = 40.78 LBS.
AREA = 64.56"x39.05" NOMINAL (17.615 SQ.FT.)

MODULE = 40.78 LBS. OVER 17.615 SQ.FT. = 2.31#/SQ.FT.
FOOT SPACING IS 48" O.C. ACROSS PANEL WIDTH WITH 2 ROWS PER MODULE

TYPICAL LAYOUT PROVIDES AN AVERAGE OF 1.6 FEET PER MODULE.

MODULE WEIGHT DISTRIBUTED PER MOUNTING FOOT =
40.78 LBS./1.6 FEET = 25.4 LBS./MTG. FOOT.



KEY PLAN

PROPOSED SYSTEM SPECIFICATIONS:
SYSTEM SIZE: DC SIZE: 5.040 KWP/AC SIZE: 3.84 KWP
MODULE USED: YINGLI 315 W MONO PANEL: QTY (16)
16 PANELS ON ROOF AT 18° PITCH, 180° AZIMUTH (TRUE)
BRANCH CIRCUIT: 1 CIRCUIT OF 16 MODULES
INVERTER USED : ENPHASE IQ7 MICRO-INVERTER (16)
RACKING: ECOFASTEN ROCK-IT
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SIGN:
NAME:
DATE:

REVISIONS

REV	DESCRIPTION	DATE	DRW BY	REV BY

DRAWING TITLE
STRUCTURAL

DATE DRAWN	11/14/2019
DRAWN BY	VIVEK
REVIEWED BY	BHAVESH

DRAWING NO.
PV-3.0

HIGH TEMP 2% AVG	33° C
EXTREME MIN TEMP	-15° C

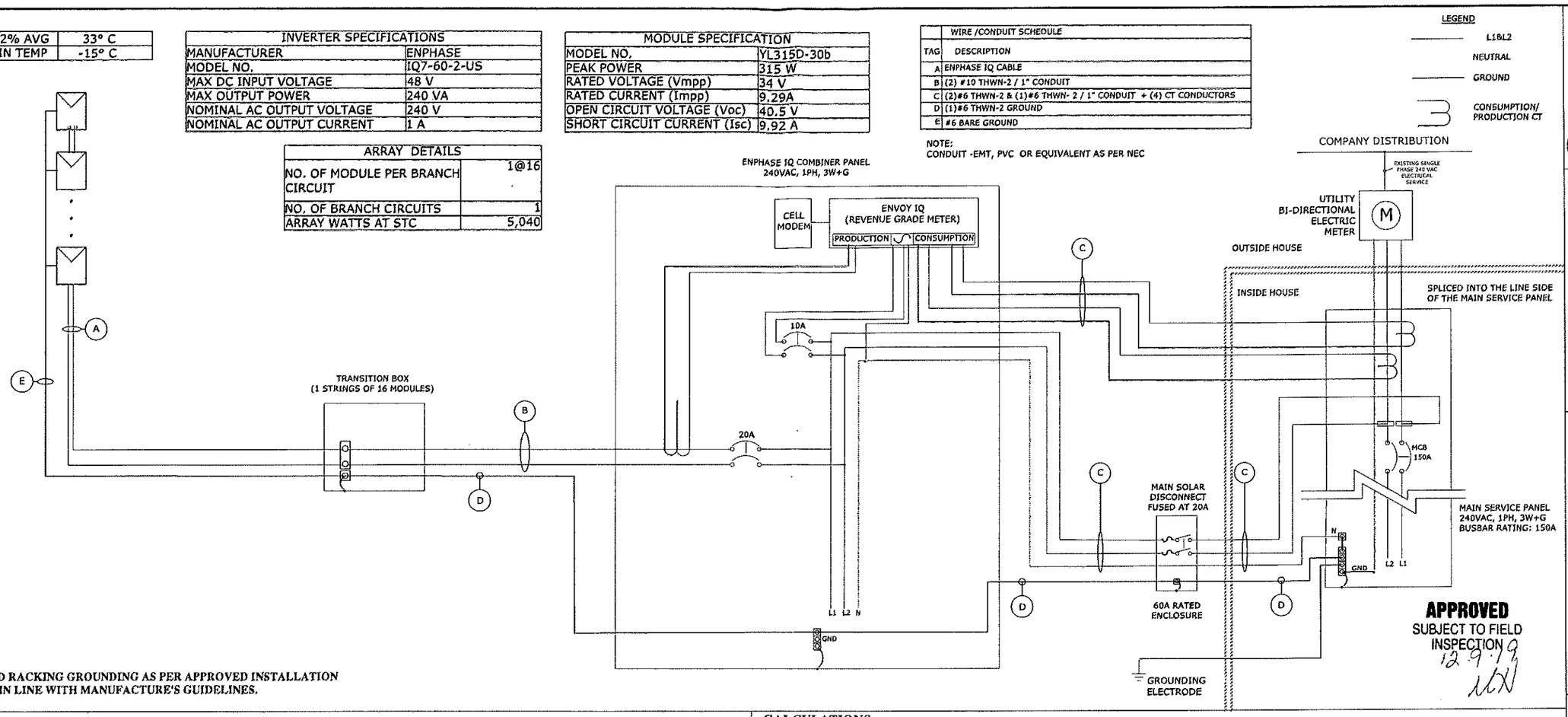
INVERTER SPECIFICATIONS	
MANUFACTURER	ENPHASE
MODEL NO.	IQ7-60-2-US
MAX DC INPUT VOLTAGE	48 V
MAX OUTPUT POWER	240 VA
NOMINAL AC OUTPUT VOLTAGE	240 V
NOMINAL AC OUTPUT CURRENT	1 A

MODULE SPECIFICATION	
MODEL NO.	YL315D-30b
PEAK POWER	315 W
RATED VOLTAGE (Vmpp)	34 V
RATED CURRENT (Impp)	9.29A
OPEN CIRCUIT VOLTAGE (Voc)	40.5 V
SHORT CIRCUIT CURRENT (Isc)	9.92 A

ARRAY DETAILS	
NO. OF MODULE PER BRANCH CIRCUIT	1@16
NO. OF BRANCH CIRCUITS	1
ARRAY WATTS AT STC	5,040

	WIRE /CONDUIT SCHEDULE
TAG	DESCRIPTION
A	ENPHASE IQ CABLE
B	(2) #10 THWN-2 / 1" CONDUIT
C	(2)#6 THWN-2 & (1)#6 THWN- 2 / 1" CONDUIT + (4) CT CONDUCTORS
D	(1)#6 THWN-2 GROUND
E	#6 BARE GROUND

NOTE:
CONDUIT -EMT, PVC OR EQUIVALENT AS PER NEC



APPROVED
SUBJECT TO FIELD INSPECTION
12-9-19

NOTES:
PV MODULE AND RACKING GROUNDING AS PER APPROVED INSTALLATION PRACTICE AND IN LINE WITH MANUFACTURE'S GUIDELINES.

GENERAL ELECTRICAL NOTES:

1. EQUIPMENT USED SHALL BE NEW AND "UL" LISTED AND SHALL BE INSTALLED AS PER MANUFACTURERS INSTALLATION MANUAL.
2. EQUIPMENT SHALL BE INSTALLED PROVIDING ADEQUATE PHYSICAL WORKING SPACE AROUND THE EQUIPMENT AND SHALL COMPLY WITH NEC.
3. PHOTOVOLTAIC POWER SYSTEMS SHALL BE PERMITTED TO OPERATE WITH UNGROUNDED PHOTOVOLTAIC SOURCE AND OUTPUT CIRCUIT AS PER NEC 690.35.
4. COPPER CONDUCTORS SHALL BE USED AND SHALL BE SIZED NOT TO EXCEED THE TEMPERATURE RATING OF THEIR INSULATION OR OF THE EQUIPMENT TO WHICH THEY ARE CONNECTED.
5. CONDUCTORS SHALL BE SIZED IN ACCORDANCE TO NEC. CONDUCTORS AMPACITY SHALL BE DE-RATED FOR TEMPERATURE CHANGE, CONDUIT FILL AND VOLTAGE DROP.
6. ALL EQUIPMENT INSTALLED OUTDOORS SHALL HAVE A NEMA 3R RATING.
7. EXPOSED NON-CURRENT CARRYING METAL PARTS SHALL BE GROUNDED AS PER NEC 690.43.
8. LOAD / LINE SIDE INTER-CONNECTION SHALL COMPLY WITH NEC.
9. ALL SOLAR SYSTEM LOAD CENTERS TO CONTAIN ONLY GENERATION CIRCUITS AND NO UNUSED POSITIONS OR LOADS.
10. PV SYSTEM CIRCUITS INSTALLED ON OR IN BUILDINGS SHALL INCLUDE A RAPID SHUTDOWN FUNCTION THAT CONTROLS SPECIFIC CONDUCTORS IN ACCORDANCE WITH NEC 690.12(1) THROUGH (5)
11. ALL CURRENT CARRYING CONDUCTORS SHALL BE PROTECTED BY CONDUIT WHERE EXPOSED TO SUNLIGHT.
12. FLEXIBLE CONDUIT SHALL NOT BE INSTALLED ON ROOFTOP. FLEXIBLE CONDUIT / NM CABLE SHALL BE USED INSIDE THE ATTIC IF REQUIRED.
13. CONDUIT TYPE / SIZE SHALL BE CHOSEN BY THE INSTALLATION CONTRACTOR TO MEET OR EXCEED NEC AND LOCAL REQUIREMENTS.
14. ALL PORTIONS OF THE PHOTOVOLTAIC SYSTEM SHALL BE MARKED CLEARLY IN ACCORDANCE WITH NEC ARTICLE 690.
15. THE ENPHASE MICROINVERTER MODEL IQ 7 DO NOT REQUIRE GROUNDING ELECTRODE CONDUCTORS (GEC) OR EQUIPMENT GROUNDING CONDUCTORS (EGC), THE MICROINVERTER HAS A CLASS II DOUBLE-INSULATED RATING, WHICH INCLUDES GROUND FAULT PROTECTION (GFP).
16. CT CONDUCTORS TO BE INSTALLED AS PER MANUFACTURER'S INSTALLATION GUIDELINES.DO NOT TRIM CT CONDUCTORS

CALCULATIONS:

1. CURRENT CARRYING CONDUCTOR

(A) BEFORE IQ COMBINER PANEL
AMBIENT TEMPERATURE - (33+22)°C= 55°C ...NEC 310.15(B)(3)(c)
TEMPERATURE DERATE FACTOR - 0.76 ...NEC 310.15(B)(2)(a)
GROUPING FACTOR -1...NEC 310.15(B)(3)(a)

CONDUCTOR AMPACITY
= (INV O/P CURRENT) x 1.25 / A.T.F / G.F ...NEC 690.8(B)
= [(16 x 1) x 1.25] / 0.76/ 1
= 26.31A
SELECTED CONDUCTOR - #10 THWN-2 ...NEC 310.15(B)(16)

(B) AFTER IQ COMBINER PANEL
TEMPERATURE DERATE FACTOR - 0.96
GROUPING FACTOR - 1

CONDUCTOR AMPACITY
= (TOTAL INV O/P CURRENT) x 1.25 / 0.96 / 1 ...NEC 690.8(B)
= [(16x 1) x 1.25] / 0.96 / 1
= 20.83A
SELECTED CONDUCTOR - #6 THWN-2 ...NEC 310.15(B)(16)

2. PV OVER CURRENT PROTECTION ...NEC 690.9(B)
= TOTAL INVERTER O/P CURRENT x 1.25
= (16x 1) x 1.25 =20A
SELECTED OCPD = 20A

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MODULE USED: YINGLI 315 W MONO PANEL: QTY (16)
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BRANCH CIRCUIT: 1 CIRCUIT OF 16 MODULES
INVERTER USED : ENPHASE IQ7 MICRO-INVERTER (16)

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(Lat , Long : 39.834281, -75.122811)

SIGN: Vincent Velluci
NAME: VINCENT VELLUCCI
Electric #34EB01572800
DATE:

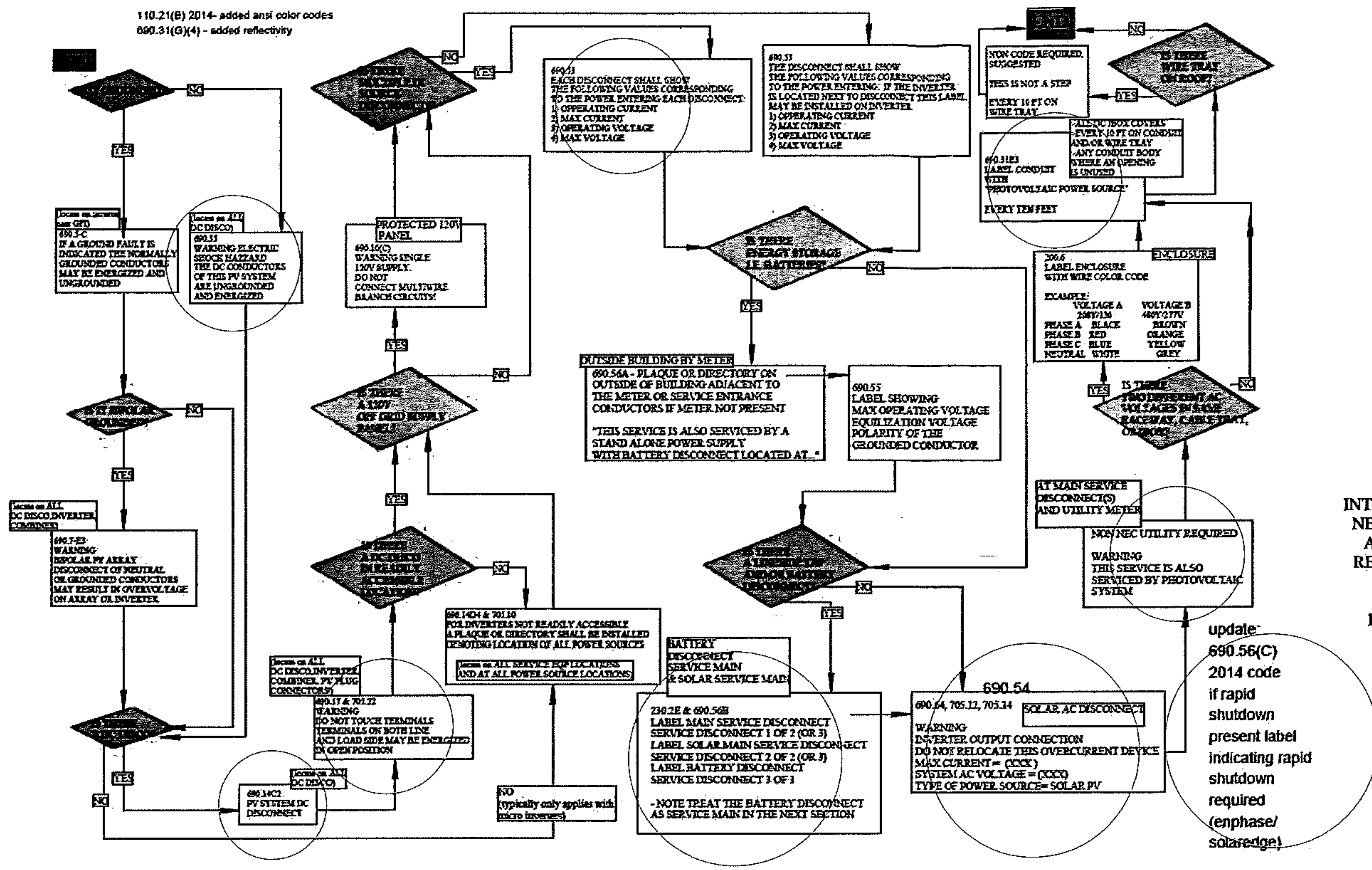
REVISIONS

REV	DESCRIPTION	DATE	DRAWN BY	REVIEWED BY

DRAWING TITLE
ELECTRICAL LINE DIAGRAM

DATE DRAWN	11/14/2019
DRAWN BY	VIVEK
REVIEWED BY	BHAVESH

DRAWING NO.
PV-4.0



INTERPRETATION OF NEC LABEL CODE - ADD LABELS AS REQUIRED WHERE SHOWN BY CIRCLING REQUIREMENT

SOLAR AC DISCONNECT LABELS

NOTICE
AC VOLTAGE = 240V
MAX FUSE: 20A
MAX CURRENT: 20A

NOTICE
RAPID SHUTDOWN DISCONNECT SWITCH

WARNING
THIS IS MAIN 2 OF 2 WITH MAIN 1 OF 2 LOCATED INSIDE

CONDUIT LABELS

CAUTION
PHOTOVOLTAIC AC SOURCE

AC COMBINER LABELS

2137 ROUTE 35
HOLMDEL, NJ 07733
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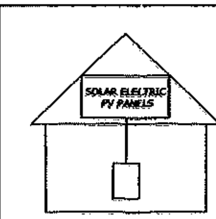
www.suntuity.com

SOLAR PV SYSTEM EQUIPPED WITH RAPID SHUTDOWN

TURN RAPID SHUTDOWN SWITCH TO THE "OFF" POSITION TO SHUTDOWN PV SYSTEM AND REDUCE SHOCK HAZARD IN ARRAY



NOTICE
THIS SYSTEM IS EQUIPPED WITH RAPID SHUTDOWN ROOFTOP INVERTERS WILL DE-ENERGISE AT SERVICE PANEL OUTAGE

NOTICE
AC COMBINER AND DATA AQUISITION.
DO NOT ADD LOADS.
DO NOT TOUCH TERMINALS.
LINE AND LOAD SIDE MAY BE ENERGIZED IN OPEN POSITION.

UTILITY METER

WARNING
⚠ DUAL POWER SOURCE ⚠

SERVICE PANEL LABEL

WARNING
THIS IS MAIN 1 OF 2 WITH MAIN 2 OF 2 LOCATED OUTSIDE
THIS SERVICE IS ALSO SERVED BY A PV SYSTEM WITH RAPID SHUTDOWN. INVERTERS LOCATED ON ROOF AUTO DE-ENERGISE WHEN SOLAR SERVICE MAIN IS IN OPEN POSITION.
THE DC CONDUCTORS OF THE PV SYSTEM ARE UNGROUNDED AND MAY BE ENERGIZED.
IF BACKFEED BREAKER PRESENT DO NOT RELOCATE THIS OVERCURRENT DEVICE.

CAUTION
DO NOT DISCONNECT UNDER LOAD

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SIGN:
NAME: VINCENT VELLUCCI
ELECTRIC #34EB01572800
DATE:

REV	DESCRIPTION	DATE	DRWN BY	REV BY

REVISIONS

DRAWING TITLE: LABELS

DATE DRAWN	11/14/2019
DRAWN BY	VIVEK
REVIEWED BY	BHAVESH

DRAWING NO. PV-5.0