

BLOCK 958.21 LOT 1516,17 QUALIFICATION CODE _____ ADDRESS (SITE) 436 Esplanade PERMIT NO. 06-2013



CONSTRUCTION PERMIT APPLICATION

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

C06-0979

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ 575		
2. Electrical	120	85	
3. Plumbing	80	310	
4. Fire Protection	45	200	
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review		1.8	
8. Subtotal	\$ 56		
9. DCA Training Fee			
10. Subtotal	35		
11. Cert. of Occupancy			
12. Other Zoning GP	60	77	
13. TOTAL	\$ 971		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories	2	
2. Height of Structure	30	ft.
3. Area - Largest Floor	1,166.7	sq. ft.
4. New Building Area	1,232	sq. ft.
5. Volume of New Structure	21,280	cu. ft.
6. Construction Classification		
7. Total Land Area Disturbed		sq. ft.
8. Flood Hazard Zone		
9. Base Flood Elevation		ft.
10. Wetlands	yes	
	no	
11. Max. Live Load		
12. Max. Occupancy Load		

(office use only)

2nd floor Addition & porch

II. PROPOSED WORK

- ☐ Minor Work
- ☐ New Building
- ☒ Addition
- ☐ Alteration
- ☒ Fire Protection
- ☒ Plumbing
- ☒ Electrical
- ☐ Elevator Devices
- ☐ Asbestos Abat. Subch. 8
- ☐ Lead Hazard Abatement
- ☐ Demolition

Est. Cost

233500
1500
12000
13000
260000

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
MA	2/25/06		6-13-06	EA			
			5/21/06	EA	10-15-07		
			6/14/08	EA			
evr	5/15/06		5/15/06	U			

TOTAL COSTS

III. DO YOU WANT: (optional)

- ☐ Partial Releases
- ☐ Prototype Processing

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

- ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
- ☐ High Pressure Boilers
- ☐ Pressure Vessels
- ☐ Refrigeration Systems
- ☐ Cross-Connections/Backflow Preventers
- ☐ Hazardous Uses/Places of Assembly
- ☐ Sprinklers
- ☐ Smoke Control Systems in Open Wells
- ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

- ☐ Hotels (R-1)
- ☐ Multi-Family (R-2)
- ☐ Two-Family (R-3) BOCA
- ☐ Two-Family (R-4) CABO
- ☐ One-Family (R-3) BOCA
- ☐ One-Family (R-4) CABO

No. of dwelling units:

Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

1. State Specific Use:

2. Use Group:

3. Change in Use Group, Indicate Former:

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

A. () I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

B. () I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii: I personally prepared the plans submitted for: 1) the new home referred to in A., or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. () I further certify that I will perform or supervise the following work:

C.1. () Building C.2. () Fire Protection

I further certify that I will perform the following work:

C.3. () Electrical C.4. () Plumbing

D. () I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I understand that if any of the above statements are willfully false, I am subject to punishment

Signature _____

Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals have been given, including such certification as the construction official may require.

I agree to advise all contractors on this project that they are required to be registered with the New Jersey Division of Taxation and to comply with all New Jersey tax laws.

I understand that if any of the above statements are willfully false, I am subject to punishment.

() Check if contractor.

Agent Name Gary Blanka

Address Box 455

allanwood MS 08720

Telephone (432) 292 2920

Signature [Signature]

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

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition		Name of Code & Edition		Other	
Building _____	Energy _____	Other _____			
Electrical _____	Barrier Free _____	_____			
Plumbing _____	Flood Hazard _____	_____			
Fire Protection _____	As Built Elevation Cert. _____	_____			
Mechanical _____	Other _____	_____			

X. CERTIFICATES ISSUED (office use only)

	No.	DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	_____	_____	_____	_____	_____
☐ Temporary Certificate of Compliance	_____	_____	_____	_____	_____
☐ Continued Certificate of Occupancy	_____	_____	_____	_____	_____
☐ Certificate of Compliance	_____	_____	_____	_____	_____
☐ Certificate of Occupancy	_____	_____	_____	_____	_____
☐ Certificate of Approval	_____	_____	_____	_____	_____
☐ Lead Abatement Clearance Certificate	_____	_____	_____	_____	_____

A.H.B.T. - MANDATORY FEE - RESIDENTIAL
IMPORTANT
Pd premium /
\$15106.40



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 12/18/2007
Control Number C-06-0979
Permit Number 06-2013
Permit Issue Date 06/19/2006
Certificate Number 06-2013

Certificate

Construction Code Division
(Certificate of Occupancy)

Identification

Work Site Location: 436 THE ESPLANADE Brick Township, NJ Block: 958.21 Lot: 15 Qual: _____
Owner in Fee: BATICH, STEPHEN J. & RITA T.
Owner Address: 436 THE ESPLANADE BRICK NJ 08724
Telephone: _____
Contractor BEACHCRAFT
Address PO BOX 455 ALLENWOOD NJ
Telephone: (732) 292-2920 Fax: (609) 208-0884
License Number or Builders Registration Number: _____ Federal Emp. Number: _____
Home Warranty Number: _____
Type of Warranty Plan: ☐ State ☐ Private
Use Group: R-5 Construction Classification: _____
Maximum Live Load: 0 Maximum Occupancy Load: 0
Description of Work Used: RESIDENTIAL ADDITION

Certificate Comments:

☒ Certificate of Occupancy

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

☐ Certificate of Approval

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

☐ Certificate of Continued Occupancy

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

☐ Temporary Certificate of Compliance

The following conditions must be met no later than _____ or the owner will be subject to fine or order to vacate: This certificate has an expiration date of: _____
Conditions to be met:

☐ Certificate of Clearance - Lead Abatement 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

- ☐ Total removal of lead-based paint hazards in scope of work
☐ Partial or limited time period (_____ years); see file

☐ Certificate of Clearance - Asbestos Abatement

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (_____ years); see file

☐ Certificate of Compliance

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____

☐ Temporary Certificate of Occupancy

The following conditions must be met no later than: _____ or the owner will be subject to fine or order to vacate: This certificate has an expiration date of: _____
Conditions to be met:


Construction Official

Fee: \$35.00

Check Number: 436

Collected By: Allison Peltier

Date Printed: 12/18/2007

Page 1



PERMIT UPDATE

Date Update Issued 12/4/2006

Control # C-06-105917

Permit # 06-2013+A

IDENTIFICATION Block: 958.21

Lot: 15

Qualifier

Work Site Location: 436 THE ESPLANADE Brick Township, NJ

Contractor

BEACHCRAFT
PO BOX 455 ALLENWOOD NJ

Owner in Fee

BATICH, STEPHEN J. & RITA T.

Address

436 THE ESPLANADE BRICK NJ 08724

Telephone:

Telephone: (732) 292-2920

Lic. No. or Bids. Reg. No.

Federal Employee No.

I am hereby granted permission to perform the following work:

- ☐ BUILDING ☒ PLUMBING ☐ LEAD HAZARD ABATEMENT
☒ ELECTRICAL ☒ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:

ELECTRICAL ALTERATIONS, FIRE ALTERATIONS, PLUMBING ALTERATIONS

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 \$13,600

Construction Official

Date

U.C.C. F170
equiv (rev 8/03)

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.

PAYMENTS (Office Use Only)	
Building	\$0
Electrical	\$85
Plumbing	\$310
Fire Protection	\$360
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$18
CO Fee	
Other	\$0
Total	\$773
Check No.	1320
Cash	\$0
Credit	\$0
Collected By	Inspection Account



CONSTRUCTION PERMIT

Date Issued 06/19/2006
Control # C-06-0979
Permit # 06-2013

IDENTIFICATION Block: 958.21 Lot: 15
Work Site Location: 436 THE ESPLANADE Brick Township, NJ

Contractor BEACHCRAFT
Address PO BOX 455 ALLENWOOD NJ

Owner in Fee BATCH, STEPHEN J. & RITA T.
Address 436 THE ESPLANADE BRICK NJ 08724

Telephone: (732) 292-2920
Lic. No. or Bldgs. Reg. No.
Federal Employee, No.

Is hereby granted permission to perform the following work:

- ☒ BUILDING ☒ PLUMBING ☐ LEAD HAZARD ABATEMENT
☒ ELECTRICAL ☒ FIRE PROTECTION ☐ DEMOLITION
☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT (Subchapter 8 only) ☐ OTHER

DESCRIPTION OF WORK:

RESIDENTIAL ADDITION

Note: If construction does not commence within one (1) year of date of issuance, or it construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work \$256,000

Construction Official _____ Date 06/19/2006

U.C.C. F170
equiv (rev 8/03)

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.

PAYMENTS (Office Use Only)

Building	\$575
Electrical	\$120
Plumbing	\$80
Fire Protection	\$45
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$56
CO Fee	\$35.00
Other	\$60
Total	\$971
Check No.	436
Cash	\$0
Credit	\$0
Collected By	Allison Peltier



BUILDING SUBCODE TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

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

Block 958.21 Lot 15, 16, & 17
Work Site Location 436 The Esplanade, Bricktown, NJ

Owner in Fee Stephen Batich
Address 436 The Esplanade, Bricktown, NJ

Tele. () [REDACTED]

Contractor Beach Craft Builders, LLC
Address PO Box 455 Allenwood, NJ 08720

Tele. () 732 292-2920

Lic. No. or Bldrs. Reg. No. 037513

Federal Emp. No. 22-3840576 or Social Security No. _____

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.

Signature [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

See plans as submitted.
(Addition / Alteration)

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
☐ No Plans Req.	_____	_____	Type:	Failure	Approval
☐ All	_____	_____	Footing	_____	_____
☐ Footing	_____	_____	Foundation	_____	_____
☐ Foundation	_____	_____	Slab	_____	_____
☐ Frame	_____	_____	Frame	_____	_____
☐ Other	_____	_____	Insulation	_____	_____
Joint Plan Review Required:			Finishes:	_____	_____
☐ Elec. ☐ Plumb. ☐ Fire			Energy	_____	_____
SUBCODE APPROVAL			Mechanical	_____	_____
☐ CO ☐ CCO ☐ CA			TCO	_____	_____
Date: _____			Other	_____	_____
Approved By: _____			Final	_____	_____

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. Alteration \$ 300,000 -

3. Total (1+2) \$ _____

TYPE OF WORK:

- ☐ New Building
☐ Addition
☐ Alteration
☐ Roofing
☐ Siding
☐ Fence _____ Height (6' or over)
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Asbestos Abatement
☐ Other _____
☐ Other _____
☐ Demolition

(Office Use Only)
FEE

\$ _____

Administrative Surcharge \$ _____

Paid ☐ Check #: _____ Minimum Fee \$ _____

Collected by: _____ DCA TRAINING FEE \$ _____

TOTAL FEE \$ _____



Permit #

Applicant: When submitting this form to your Local Construction Code

Collector - Recommended TCO

- 1) Drop Fixture in Garage to verify 2 layers
- 2) Post Valley in attic - (Valley closest to Attic Access)



BUILDING SUBCODE TECHNICAL SECTION



Date Received 02/24/2006
Control # C-06-0979
Date Issued
Permit #

06-17-06
06-2013

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

Block 958.21 Lot 15 Qualification Code

Work Site Location: 436 THE ESPLANADE Brick Township, NJ

Owner in Fee: BATICH, STEPHEN J. & RITA T.

Address 436 THE ESPLANADE BRICK NJ

Te [REDACTED]

Contractor: BEACHCRAFT

Address PO BOX 455 ALLENWOOD NJ

Tel. (732) 292-2920 Fax. (609) 208-0884

Contractor License No. or, if new home, Bldrs Reg. No.

Federal Employee No.

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

RESIDENTIAL ADDITION

See Architects Note on Braced Walls
See All Notes on Plan

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
☐ Other
☐ Demolition

FEE (Office Use Only)

\$0
\$575
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0
\$0

Administrative Surcharge \$0
Minimum Fee \$0
State Permit Surcharge Fee \$56
TOTAL FEE \$631

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plan Required

☒ All 6-13-06 Jm

☐ 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

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 0 Proposed R-5 Est. Cost of Bldg. Work:

Constr. Class Present 0 Proposed 0 1. New Bldg. \$0

Number of Stories 2 2. Rehabilitation \$0

Height of Structure 30 Ft. 3. Total (1+2) \$233,500

Area - Largest Floor 1667 Sq. Ft.

New Bldg. Area / All Floors 1232 Sq. Ft.

Volume of New Structure 21280 Cu. Ft.

Total Land Area Disturbed Sq. Ft.

Only 1 Complete Set of Plans

9/28/07 SOURCE TO BE I

1 2 3 4 5



ELECTRICAL SUBCODE TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

06-2013

06-19-06

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

Block 958.21 Lot 15, 16, 17
Work Site Location 436 The Esplanade
Bricktown, NJ
Owner in Fee/Occupant Stephen Batich
Address 436 The Esplanade
Bricktown, NJ
Tele. [REDACTED]
Contractor MAYNARD ELECTRIC INC
Address 1900 WALL CHURCH RD
WALL TWP NJ 07719
Tele. (732) 4149 1222 Fax (732) 4149 4738
Lic. No. 11155
Federal Emp. No. [REDACTED]

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [] Other _____
Building Occupied as DWELLING Utility Co. _____
Est. Cost of Elec. Work \$ 9000-

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Type:	Failure	Failure	Approval	Initial
☒ No Plans Required								
Joint Plan Review Required:								
[] Building [] Plumbing								
[] Fire [] Elevator								
☒ Elec. Plans Approved								
Date: <u>6/14/06</u>								
Approved by: <u>[Signature]</u>								
SUBCODE APPROVAL			Temp. Cut-in-Card Date Issued					
Date: <u>12/19/07</u> CA			Final Cut-in-Card Date Issued					
Approved by: <u>[Signature]</u>								

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.

[Signature]
Applicant's Signature/Contractor's Seal and Signature

☒ Licensed Electrical Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
<u>35</u>		Lighting Fixtures
<u>40</u>		Receptacles
<u>26</u>		Switches
<u>9</u>		Detectors
		Light Poles
		Motors—Fract. HP
<u>9</u>		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
TOTAL NUMBERS		
<u>120</u>		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
<u>1</u>	<u>6</u>	HP Garbage Disposal
<u>1</u>	<u>1</u>	KW Central A/C Unit
		HP/KW Space Heater/Air Handler
		KW Baseboard Heat
		HP Motors 1/+ HP
<u>1</u>	<u>200</u>	KW Transformer/Generator
		AMP Service
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light

FEE (Office Use Only)

Administrative Surcharge	\$
Minimum Fee	\$
DCA Training Fee	\$
TOTAL FEE	\$



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 958-21 Lot 15-17 Qualification Code 436
Work Site Location The Esplanade

Owner in Fee Brick
Address same

Tel ()
Contractor MAYNARD ELECTRIC INC
Address 1900 WALL CHURCH RD
WALL TWP NJ 07719
Tel (732) 449-1122 FAX (732) 449-4738
Contractor License No. 11155
Federal Emp. No. [REDACTED]

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
Building Occupied as DWELLING Utility Co. _____
Est. Cost of Elec. Work \$ 7000

JOB SUMMARY (Office Use Only)						
PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)
☒	No Plans Required			Type:	Failure	Failure
	Joint Plan Review Required:			Rough		
☐	Building	☐	Plumbing	Barrier-Free		
☐	Fire	☐	Elevator	Trench		
☐	Elec. Plans Approved			Temp. Serv.		
Date:	<u>112906</u>			Constr. Serv.		
Approved by:	<u>[Signature]</u>			TCO		
				Other		
				Service		
				Final		
				Barrier-Free		
SUBCODE APPROVAL				Temp. Cut-in-Card Date Issued _____		
☐	CO	☐	CCO	☐	CA	Final Cut-in-Card Date Issued _____
Date: _____				Annual Pool Inspection _____		
Approved by: _____				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

☒ Licensed Elec. Contractor ☐ Certified Landscape Irrigation Contr'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY	SIZE	ITEMS
<u>53</u>		Lighting Fixtures
<u>40</u>		Receptacles
<u>44</u>		Switches
		Detectors
		Light Poles
<u>3</u>		Motors—Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel

140

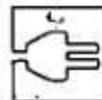
TOTAL NUMBERS

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 _____

FEE (Office Use Only)

\$ _____

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



Date Received
Date Issued
Control #
Permit #

06-2013
- 06-19-06

Block 958.21 Lot 15, 16, 17
Work Site Location 436 The Esplanade
BRICK TOWN, NJ
Owner in Fee/Occupant Stephen Batich
Address 436 The Esplanade
BRICK TOWN, NJ
Tele. [REDACTED]
Contractor MARKED ELECTRIC INC
Address 1900 WALL CHURCH RD
WALL TWP NJ 07719
Tele. (732) 2149 1222 Fax (732) 2149 4738
Lic. No. 11155
Federal Emp. No. [REDACTED]

Use Group Present _____ Proposed _____
☐ Pole/Pad # _____ ☐ Temporary ☐ Other: _____
 Building Occupied as DWELLING Utility Co. _____
 Est. Cost of Elec. Work \$ 9000-

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)			
				Type:	Failure	Failure	Approval	Initial	
☒ No Plans Required				Rough	_____	_____	_____	_____	
Joint Plan Review Required:				Temp. Serv.	_____	_____	_____	_____	
☐ Building	☐ Plumbing			Constr. Serv.	_____	_____	_____	_____	
☐ Fire	☐ Elevator			TCO	_____	_____	_____	_____	
☒ Elec. Plans Approved				Other	_____	_____	_____	_____	
Date: <u>6/14/06</u>				Service	_____	_____	_____	_____	
Approved by: <u>[Signature]</u>				Final	_____	_____	_____	_____	

Date: _____
Approved by: _____

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 Electrical Contractor ☐ Exempt Applicant

QTY.	SIZE	ITEMS
35		Lighting Fixtures
40		Receptacles
26		Switches
9		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency & Exit Lights
9		Communications Points
		Alarm Devices/F.A.C. Panel

		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
1	6	HP Garbage Disposal
1	1	KW Central A/C Unit
		HP/KW Space Heater/Air Heat
		KW Baseboard Heat
		HP Motors 1+ HP
		KW Transformer/Generator
1	200	AMP Service
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light

S

Administrative Surcharge	\$ _____
Minimum Fee	\$ _____
DCA Training Fee	\$ _____
TOTAL FEE	\$ _____



FIRE SUBCODE TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

06-19-06

06-2013

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

Block 958.21 Lot 15, 16, 17
Work Site Location 436 The Esplanade
Bricktown, NJ
Owner in Fee Stephen Batich
Address 436 The Esplanade
Bricktown, NJ
Tele. [REDACTED]
Contractor Beach Craft Builders, LLC
Address PO Box 455
Allenwood, NJ 08780
Tele. (732) 292-2920 Fax (732) 292-2921
Lic. No. 037513
Federal Emp. No. 22-3840576

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
Heating Systems ☒ New ☒ Existing ☒ HVAC
Type: ☒ Gas ☐ Oil ☐ Electric ☐ Solar
☐ Other _____
Location: _____
Total Cost of Fire Protection Work \$ 1500.

Fire Alarm System
New ☒ Existing ☐
Location of Panel: _____
Fire Suppression/Standpipe System
New ☐ Existing ☐
Location of Main Control Valve: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source _____
Method of Alarm/Suppression System Supervision _____

Storage Tanks

Type: ☐ Flammable Liquid ☐ Combustible Liquid
☐ LPG ☐ LNG Capacity _____ Fuel _____
Alarm Systems ☒ 110v Interconnected **NUMBER**
☐ System

Alarm Devices (i.e., smoke, heat, pulls, water/flow) 9
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 _____
CO₂ Suppression _____
Foam Suppression _____
Halon Suppression _____
Other _____
Kitchen Hood Exhaust System _____
Smoke Control System _____
Gas ☐ or Oil ☐ Fired Appliances _____
Other _____

FEE (Office Use Only)

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required
Joint Plan Review Required:
☐ Building ☐ Plumbing
☐ Electric ☐ Elevator
☒ Fire Plans Approved
Date: 5-2-07

Approved by: [Signature]

SUBCODE APPROVAL

☐ CO ☐ CCO ☒ CA
Date: 10-1-07
Approved by: [Signature]

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Alarm System	<u>12/6/06</u>		<u>10-1-07</u>	<u>[Signature]</u>
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Final	<u>12/6/06</u>	<u>10-1-07</u>	<u>10-1-07</u>	<u>[Signature]</u>
Other				

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.

Signature [Signature]

Administrative Surcharge \$ _____
Minimum Fee \$ _____
DCA Training Fee \$ _____
TOTAL FEE \$ _____

~~12/6/51 - Not ready for final~~

10/11/50
O.B.K.



FIRE PROTECTION SUBCODE TECHNICAL SECTION

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

Block 958-21 Lot 15-17 Qualification Code _____
 Work Site Location 436 ESPANADE
BRICK
 Owner in Fee MR. BATICCH
 Address _____

Tel (_____) _____
 Contractor CHECKPOINT ALARM SYSTEM
 Address 13 LAURENCE DR.
BRICK

Tel (732) 899-7660 FAX (732) 899-5725
 Fire Protection Equipment, NJ Div of Fire Safety Permit No. 13VH00393400
 Fire Protection Equipment, NJ Div of Fire Safety Installer No. P00142
 Fire Alarm Contractor No. 153247
 Federal Emp. No. 222-203-820

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____ Fire Alarm System: ☐ New or ☐ Existing
 Constr. Class: Present _____ Proposed _____ Location of Panel: _____
 Heating System: ☐ New or ☐ Existing ☐ HVAC Fire Suppression/Standpipe System: _____
 Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar ☐ New or ☐ Existing
☐ Other _____ Location of Main Control Valve: _____
 Location: _____

Fuel Storage Tank:

Fuel Type: ☐ Flammable or ☐ Combustible Capacity _____
 Total Cost of Fire Protection Work \$ 1600.00

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Approval	Initial
☐ No Plans Required		Alarm System		<u>See back</u>	
Joint Plan Review Required:		Suppression Sys.			
☐ Building ☐ Plumbing		Standpipe			
☐ Electric ☐ Elevator		Fire Pump			
☒ Fire Plans Approved		Pre-Eng. System			
Date: <u>11-30-06</u>		Mechanical			
Approved by: <u>[Signature]</u>		Smoke Control			
SUBCODE APPROVAL		TCO			
☐ CO ☐ CCO ☒ PCA		Flam/Combust Tanks			
Date: <u>11-30-06</u>		Fireplace Venting			
Approved by: <u>[Signature]</u>		Final			
		Other			

U.C.C. F140
(rev. 1/04)

1 White = Inspector Copy
3 Pink = Office Copy



Date Received
Control #
Date Issued
Permit #

Update 06-2013+41
12-4-06
C06 105917

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent or) 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:

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 LOW VOLTAGE		
Alarm Devices (i.e. smoke, heat, pulls, water/flow)	<u>10</u>	
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		
Fired Appliances ☒ Gas or ☐ Oil	<u>te</u>	
Fireplace Venting/Metal Chimney	<u>I</u>	
Other		

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

2 Canary = Office Copy
4 Gold = Applicant Copy

Alarms tested under permit 06-3367

OK 7-14-07

10/15/07 Upper/Lower construction air needed for both
dryer rooms (basement / 2nd Fl.)

OK.



**FIRE
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

06-19-16

06-2013

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

Block 958.21 Lot 15, 16, 17
Work Site Location 436 The Esplanade
Bricktown, NJ
Owner in Fee Stephen Batich
Address 436 The Esplanade
Bricktown, NJ
Tele. [REDACTED]
Contractor Beach Craft Builders, LLC
Address PO Box 455
Allenwood, NJ 08780
Tele. (732) 292-2920 Fax (732) 292-2921
Lic. No. 037513
Federal Emp. No. 22-3840576

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
Heating Systems ☒ New ☒ Existing ☒ HVAC
Type: ☒ Gas ☐ Oil ☐ Electric ☐ Solar
☐ Other _____
Location: _____
Total Cost of Fire Protection Work \$ 1500.

Fire Alarm System
New ☒ Existing ☐
Location of Panel: _____
Fire Suppression/Standpipe System
New ☐ Existing ☐
Location of Main Control Valve: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source _____
Method of Alarm/Suppression System Supervision _____

Storage Tanks

Type ☐ Flammable Liquid ☐ Combustible Liquid

Capacity 5000 Gallons

Alarm Systems ☒ 110v Interconnected **NUMBER**

(Additional System)

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 _____

CO₂ Suppression _____

Foam Suppression _____

Halon Suppression _____

Other _____

Kitchen Hood Exhaust System _____

Smoke Control System _____

Gas ☐ or Oil ☐ Fired Appliances _____

Other _____

FEE (Office Use Only)

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

Joint Plan Review Required:

☐ Building ☐ Plumbing

☐ Electric ☐ Elevator

☒ Fire Plans Approved

Date: 5-3-16

Approved by: [Signature]

SUBCODE APPROVAL

☐ CO ☐ CCO ☐ CA

Date: _____

Approved by: _____

INSPECTIONS

Type:

Alarm System

Suppression Sys.

Standpipe

Fire Pump

Pre-Eng. System

Mechanical

Smoke Control

TCO

Final

Other _____

Dates (Month/Day)

Failure Failure Approval Initial

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.

Signature

Administrative Surcharge \$ _____
Minimum Fee \$ _____
DCA Training Fee \$ _____
TOTAL FEE \$ _____



FIRE PROTECTION SUBCODE TECHNICAL SECTION

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

Block 958-21 Lot 15-17 Qualification Code _____
Work Site Location 436 ESPANOLA
BRICK

Owner in Fee MR. GATICH
Address _____

Tel _____

Contractor CHECKPOINT ALARM SYSTEM
Address 13 LAWRENCE DR.
BRICK

Tel (732) 899-7660 FAX (732) 899-5925

Fire Protection Equipment, NJ Div of Fire Safety Permit No. 13VH00393400

Fire Protection Equipment, NJ Div of Fire Safety Installer No. P00142

Fire Alarm Contractor No. 153247

Federal Emp. No. 222-203-820

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____ Fire Alarm System: [] New or [] Existing

Constr. Class: Present _____ Proposed _____ Location of Panel: _____

Heating System: [] New or [] Existing [] HVAC Fire Suppression/Standpipe System:

Type: [] Gas [] Oil [] Electric [] Solar [] New or [] Existing

[] Other _____ Location of Main Control Valve: _____

Location: _____

Fuel Storage Tank:

Fuel Type: [] Flammable or [] Combustible Capacity _____

Total Cost of Fire Protection Work \$ 1600.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required: Original

[] Building [] Plumbing

[] Electric [] Elevator

[] Fire Plans Approved

Date: 11-30-06

Approved by: AO

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date: _____

Approved by: _____

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 _____

Final _____

Other _____



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. [Signature]

Applicant's Signature/Contractor's Signature
[] Certified Contractor [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

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 LOW VOLTAGE	_____	_____
Alarm Devices (i.e. smoke, heat, pulls, water/flow)	10	_____
Supervisory Devices (i.e., lamps, 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	_____	_____
Fired Appliances [] Gas or [] Oil	to	_____
Fireplace Venting/Metal Chimney	I	_____
Other	_____	_____

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



Date Received
Date Issued
Control #
Permit #

06-19-06
06-2013

Block 958.21 Lot 15, 16, 17
Work Site Location 436 THE ESPLANADE
BRICKTOWN, NJ
Owner in Fee Stephen Batich
Address 436 The Esplanade
BRICKTOWN NJ
Tel [REDACTED]
Contractor Juwigart Plumbing + Heating Inc.
Address 25440 Constance Dr.
Morrisville NC 27560
Tel. (732) 292-9700 Fax (732) 681-5882
Lic. No. 9822
Federal Emp. No. 233 367 7317

Use Group Present _____ Proposed _____
 Building Sewer Size 4" Public Sewer _____ Private Septic _____
 Water Service Size 1" Public Water _____ Private Well _____
 Est. Cost of Plumbing Work \$ 12,000.

Approved by:

TCO

Other

TOTAL FEE

Licensed Plumbing Contractor ☐ Exempt Applicant

2 Canary = Office Copy
4 Gold = Applicant Copy

1" WATER - B.T.MVA-OK



CHANGE of Contractor only

PLUMBING SUBCODE TECHNICAL SECTION



Date Received 10/26/06
Control #
Date Issued
Permit # 06-2013

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

Block 958.21 Lot 15 Qualification Code
Work Site Location 436 The Esplanade, Brick, NJ

Owner in Fee Batich, Stephen J. & Rita T.
Address 436 The Esplanade, Brick, NJ

Tel () [REDACTED]

Contractor Swing & Plumbing & Heavy Inc.
Address 1540 Converse Dr. Madison

Tel (732) 242-9700 FAX ()

Contractor License No. 9822
Federal Emp. No. 253-367-7317

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size 4" Public Sewer _____ Private Septic _____
Water Service Size 1" Public Water _____ Private Well _____
Est. Cost of Plumbing Work \$ 12,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Failure	Failure	Approval	Initial
[] No Plans Required	Type:				
Joint Plan Review Required:	Slab			<u>11/21/06</u>	<u>[Signature]</u>
[] Building [] Electric	Rough			<u>11/21/06</u>	<u>[Signature]</u>
[] Fire [] Elevator	Water			<u>12/21/07</u>	<u>[Signature]</u>
[] Plumbing Plans Approved	Sewer	<u>7/9/07</u>		<u>12/21/07</u>	<u>[Signature]</u>
Date: _____	Fixtures			<u>12/21/07</u>	<u>[Signature]</u>
Approved by: _____	Gas Equipment	<u>11/21/06</u>		<u>12/21/07</u>	<u>[Signature]</u>
SUBCODE APPROVAL	Gas Piping			<u>12/21/07</u>	<u>[Signature]</u>
[] CO [] CCO <u>[Signature]</u> CA	LPGas Tank				
Date: <u>7-26-07</u>	Fuel Oil Piping				
Approved by: <u>[Signature]</u>	Solar				
	TCO				
	<u>[Signature]</u>			<u>11/21/06</u>	<u>[Signature]</u>
	<u>[Signature]</u>			<u>7/23/07</u>	<u>[Signature]</u>

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

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
<u>3</u>	Water Closet	\$ _____
<u>2</u>	Urinal/Bidet	_____
<u>4</u>	Bath Tub	_____
<u>1</u>	Lavatory	_____
<u>3</u>	Shower	_____
<u>1</u>	Floor Drain	_____
<u>3</u>	Sink	_____
<u>1</u>	Dishwasher	_____
<u>2</u>	Drinking Fountain	_____
<u>2</u>	Washing Machine	_____
<u>2</u>	Hose Bibb	_____
<u>1</u>	Water Heater	_____
<u>1</u>	Fuel Oil Piping	_____
<u>1</u>	Gas Piping	_____
<u>1</u>	LPGas Tank	_____
<u>1</u>	Steam Boiler	_____
<u>1</u>	Hot Water Boiler	_____
<u>1</u>	Sewer Pump	_____
<u>1</u>	Interceptor/Separator	_____
<u>1</u>	Backflow Preventer	_____
<u>1</u>	Greasetrap	_____
<u>1</u>	Sewer Connection	_____
<u>1</u>	Water Service Connection	_____
<u>1</u>	Stacks	_____
<u>1</u>	Other	_____
<u>1</u>	Other	_____

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

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
[Signature]
[] Licensed Plumbing Contractor [] Exempt Applicant

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

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

11/21/05

① - OP DATES: NORMAN

② - ROUGH - OK + 1751 - OK

③ - AK INCOMPLETE

④ - GAS NOT READY - NORMAN REMAINS

9/9/07

① - GAS SHUT OFF Valve Affected (Days)
upstairs



PLUMBING SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

update 06-2013
12-4-06
COB. 105917

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

Block 958.21 Lot 15 Qualification Code _____
Work Site Location 436 The Esplanade, Brick N.J.
Owner in Fee Batic, Stephen J. + Rita T.
Address 436 Esplanade Brick N.J.
Tel _____
Contractor S. Nigam Plg. + Htg. INC.
Address 25440 Constance Dr. Manasquan N.J. 08736
Tel (732) 242-9700 FAX () _____
Contractor License No. 9828
Federal Emp. No. 233-367-7317

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 \$ 5,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)		
		Type:	Failure	Failure	Approval	Initial
☐ No Plans Required		Slab			6/6/06	Ⓢ
Joint Plan Review Required:		Rough				
☐ Building ☐ Electric		Water				
☐ Fire ☐ Elevation		Sewer				
☒ Plumbing Plans Approved		Fixtures				
Date: <u>12/1/06</u>		Gas Equipment			6/6/06	Ⓢ
Approved by: _____		Gas Piping				
SUBCODE APPROVAL		LPGas Tank				
☒ CO ☐ CCO ☐ CA		Fuel Oil Piping				
Date: <u>7-28-07</u>		Solar				
Approved by: _____		TCO			7/28/07	Ⓢ

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent or 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
[Signature]
☒ Licensed Plumbing Contractor ☐ Exempt Applicant

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

NO.	FIXTURE/EQUIPMENT
1	Water Closet
	Urinal/Bidet
	Bath Tub
1	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
2	Washing Machine
	Hose Bibb
	Water Heater
9	Fuel Oil Piping
	Gas Piping
	LPGas Tank
	Steam Boiler
1	Hot Water Boiler
	Sewer Pump
	Interceptor/Separator
	Backflow Preventer
	Greasetrap
1	Sewer Connection
	Water Service Connection
2	Stacks <u>A/C</u>
	Other _____
	Other _____

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

80' C/WANT
1/5-530,000



PLUMBING SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

date 06-2013+H

12-4-06

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

Block 958.21 Lot 15 Qualification Code _____
Work Site Location 436 Tie Esplanade, Brick N.J.

Owner in Fee Batic, Stephen J. + Rita T
Address 436 Esplanade Brick N.J.

Address [REDACTED] to FNC

Address 25440 Constance Rd. Manasquan N.J. 08730

Tel (732) 242-4700 FAX ()

Contractor License No. 9800

Federal Emp. No. 233-367-7317

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 \$ 5,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)			
		Type:	Failure	Failure	Approval	Initial	
☐ No Plans Required		Slab					
Joint Plan Review Required:		Rough					
☐ Building ☐ Electric		Water					
☐ Fire ☐ Elevator		Sewer					
☒ Plumbing Plans Approved		Fixtures					
Date: <u>12/1/06</u>		Gas Equipment					
Approved by: <u>[Signature]</u>		Gas Piping					
SUBCODE APPROVAL		LPGas Tank					
☐ CO ☐ CCO ☐ CA		Fuel Oil Piping					
Date: _____		Solar					
Approved by: _____		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.

[Signature]

Applicant's Signature/Contractor's Seal and Signature

☒ Licensed Plumbing Contractor ☐ Exempt Applicant

9822

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

NO.	FIXTURE/EQUIPMENT
1	Water Closet
	Urinal/Bidet
	Bath Tub
1	Lavatory
	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
2	Washing Machine
	Hose Bibb
	Water Heater
	Fuel Oil Piping
9	Gas Piping
	LPGas Tank
	Steam Boiler
1	Hot Water Boiler
	Sewer Pump
	Interceptor/Separator
	Backflow Preventer
	Greasetrap
1	Sewer Connection
2	Water Service Connection
	Stacks <u>A/C</u>
	Other _____
	Other _____

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

80' p (H) AT
1 1/2" - 534,000



Change of Contractor only

PLUMBING SUBCODE TECHNICAL SECTION



Date Received
Control #

10/26/06

Date Issued
Permit #

06-2013

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

Block 958.21 Lot 15 Qualification Code _____
Work Site Location 436 The Esplanade, Brick, NJ

Owner in Fee Ratich Stephen T & Rita T.
Address 436 The Esplanade, Brick, NJ

Tel _____
Contractor Swigart Plumbing & Heating Inc.
Address 1500 Convent Ave, Dr. Madison

Tel (732) 222-9700 FAX () _____
Contractor License No. 9822
Federal Emp. No. 253-367-1317

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size 4" Public Sewer _____ Private Septic _____
Water Service Size 1" Public Water _____ Private Well _____
Est. Cost of Plumbing Work \$ 12,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Failure	Failure	Approval	Initial
[] No Plans Required	Type:				
Joint Plan Review Required:	Slab				
[] Building [] Electric	Rough				
[] Fire [] Elevator	Water				
[] Plumbing Plans Approved	Sewer				
Date: _____	Fixtures				
Approved by: _____	Gas Equipment				
SUBCODE APPROVAL	Gas Piping				
[] CO [] CCO [] CA	LPGas Tank				
Date: _____	Fuel Oil Piping				
Approved by: _____	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.

Applicant's Signature/Contractor's Seal and Signature
[X] Licensed Plumbing Contractor [] Exempt Applicant

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

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

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



Date Received
Date Issued
Control #
Permit #

06-19-06
06-2013

Block 958.21 Lot 15.16, 17
Work Site Location 4310 THE ESPERANADE
BRICKTOWN NJ
Owner in Fee Stephen Ratick
Address 4310 The Esplanade
Bricktown NJ
Tele. ()
Contractor Swiggart Plumbing + Heating Inc.
Address 25440 Coustace Dr.
Mansfield 08736
Tele. (732) 292-9700 Fax (732) 681-5882
Lic. No. 9822
Federal Emp. No. 233 367 7317

Use Group Present _____ Proposed _____
 Building Sewer Size 4" Public Sewer _____ Private Septic _____
 Water Service Size 1" Public Water _____ Private Well _____
 Est. Cost of Plumbing Work \$ 12,000.

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)			
[] No Plans Required	Type:	Failure	Failure	Approval	Initial
Joint Plan Review Required:	Slab	_____	_____	_____	_____
[] Building [] Electric	Rough	_____	_____	_____	_____
[] Fire [] Elevator	Water	_____	_____	_____	_____
X Plumbing Plans Approved	Sewer	_____	_____	_____	_____
Date: 5/24/16	Fixtures	_____	_____	_____	_____
Approved by: _____	Gas Equipment	_____	_____	_____	_____
	Gas Piping	_____	_____	_____	_____
SUBCODE APPROVAL	Solar	_____	_____	_____	_____
[] CO [] CCO [] CA	TCO _____	_____	_____	_____	_____
Date: _____	_____	_____	_____	_____	_____
Approved by: _____	_____	_____	_____	_____	_____

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.

Signature _____ Contractor's Seal _____
☒ Licensed Plumbing Contractor ☐ Exempt Applicant

NO.	FIXTURE/EQUIPMENT
2	Water Closet
	Urinal/Bidet
2	Bath Tub
3	Lavatory
1	Shower
	Floor Drain
	Sink
	Dishwasher
	Drinking Fountain
	Washing Machine
	Hose Bibb
1	Water Heater
	Fuel Oil Piping
	Gas Piping
	Steam Boiler
	Hot Water Boiler
	Sewer Pump
	Interceptor/Separator
	Backflow Preventer
	Greasetrap
	Sewer Connection
1	Water Service Connection
	Stacks
	Other _____
	Other _____
	Other _____

S

Administrative Surcharge	\$ _____
Minimum Fee	\$ _____
DCA Training Fee	\$ _____
TOTAL FEE	\$ _____

U.C.C. F130
(rev. 3/96)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

1" WATER - B.T.M.A - OK

**Township of Brick
Zoning Permit**

Approved:	Wednesday, May 03, 2006	Number:	521
Block	958.21	Lot	15
		Zone:	R-10
Property Address:	436 The Esplanade		
Applicant:	Gary Blank, Beach Craft Builders		
Property Owner:	Stephen Batich		
Existing Use:	Single Family Residential		
Proposed Use:	Single Family Residential		
Proposed Construction:	First floor alterations; re-construct porch, 8' 8" x 27' 8", 10' high; second story addition 69' x 28' 4", eave height 18' 6", ridge height 29'; two story porch 6' x 12'.		
Conditions:	Same footprint with the exception of the new two story porch addition. The new porch must be set back at least 30 feet from the front property line, 6 feet from the side property line and 20 feet from the rear property line.		

This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis that this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been commenced.


Michael P. Fowler, AICP/PP

Principal Planner


Sean Kinnevy

Zoning Officer

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

(Please Type or Print Neatly in Ink, Not Pencil)

2006

Applications missing any of the following information will delay processing and may be returned to you.

MAY 3 2006

BLOCK 958.21 LOT 15, 16, 17 QUALIFIER _____
PROPERTY ADDRESS 436 The Esplanade, Brick town, NJ
PERSONAL NAME OF APPLICANT Gary Blank
BUSINESS NAME OF APPLICANT Beach Gray + Builders, LLC
MAILING ADDRESS OF APPLICANT PO Box 455 Akenwood, NJ 08720
PROPERTY OWNER'S FULL NAME Stephen Batich

PRESENT USE OF PROPERTY (check all that apply)

- ☐ Vacant Lot ☒ Single-family dwelling ☐ Multi-family dwelling
☐ Commercial (please describe) _____

PROPOSED USE OF PROPERTY (check all that apply)

- ☐ Vacant Lot ☒ Single-family dwelling ☐ Multi-dwelling
☐ Commercial (please describe) _____

PROPOSED CONSTRUCTION (check all that apply)

- ☐ New Building (please describe) _____ Height _____
☒ Addition - Height 30 ft.
☐ Alteration _____
☒ Porch or deck - Height 10' H.
☐ Shed - Height _____ Height _____
☐ Fence - Type _____
☐ Swimming Pool ☐ in-ground ☐ above-ground
☐ Other (please describe) _____

CHECKLIST

- ☐ All information completed above
☐ Two (2) copies of a plot plan containing:
☐ All existing and proposed structures
☐ All dimensions of the lot and structures
☐ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways
☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

Note: No partial, taped, faxed, reduced or enlarged copies can be accepted.

The applicant certifies that all statements and information made and provided as part of this application are true to the best of the applicant's knowledge, information and belief. The applicant further states that the applicant will comply with all other Municipal approvals and ordinances, and all County, State, and Federal Regulations.

SIGNATURE OF APPLICANT [Signature] Date 2/28/06 Approved [Signature] Denied

Reviewed by Zoning Office [Signature] Date 5/3/06

March 2003

off
2/26/06

SPECIFICATIONS FOR CONSTRUCTION

For

BATH RESIDENCE

RONALD E. RHEAUME, AIA
ARCHITECT



LICENSE NO. 10021

(609) 208-0884

4 HIDDEN HOLLOW DRIVE, YARDVILLE, NEW JERSEY 08620

01000 GENERAL DATA

- A. Project Description: Construct a new 2nd floor addition and renovation to an existing residence.
- B. Modifications to these plans by the Owner or Contractor without written permission of the Architect is the sole responsibility of said Owner or Contractor.
- C. Dimensions:
Contractor shall check and verify all dimensions and conditions before proceeding with construction. He shall not scale the drawings. Written dimensions shall govern.
- D. Site Examination:
Contractor shall examine the site and inform himself as to facilities for delivery, storage, floor loads, etc.
- E. Permits, Licenses, Inspection:
Contractor shall obtain and pay for all permits, fees, licenses, etc., required by Local, State and authorized bodies having jurisdiction. Contractor shall schedule and arrange for all municipal inspections as required to obtain approvals.

02000 SITE WORK

- A. Site Clearing:
Protection of existing trees to remain, strip topsoil, clearing and grubbing, as required.
- B. Excavating, Filling, Grading:
Excavated for footings and slabs, to elevations and dimensions indicated.
- C. Compact backfill for slab to 90% AASHC density.
- D. Place backfill and fill; grade areas indicated with uniform levels and slopes between finish elevations. Spread topsoil as required.
- E. Remove excess excavated material, trash debris and waste material from site and legally dispose of.

03000 CONCRETE

- Contractor shall provide all necessary labor, materials, and equipment to complete all concrete shown or noted in these documents.
- A. All concrete work shall conform to ACI 301 and ACI 318, as applicable.

- B. All footings shall be a minimum 3'-0" below finish grade and shall rest on firm undisturbed soil.
- C. Foundation design is based on soil bearing pressure of 3,000 PSF. Contractor shall verify.
- D. All concrete for slabs, footings and caissons shall develop 3,500 PSI compressive strength in 28 days and shall be protected from weather extremes and drying out during the curing period.
- E. All concrete form work shall be adequately tied together and braced to form true lines, square corners and plumb walls.
- F. All footings shall be formed to meet sizes indicated on the drawings, details and/or schedules.
- G. Poured in place concrete shall be poured continuously with no cold joints. Material shall be adequately vibrated to prevent the occurrence of air pockets and honeycomb effect.
- H. No concrete shall be poured subject to freezing conditions or on frozen ground.

I. Materials:

Portland Cement:	ASTM C150 Type 1
Aggregates:	ASTM C33
Water:	Potable
Air Entrainment:	ASTM C260 "Dorex AEA"; W.R. Grace.
Calcium Chloride:	Not Permitted
Reinforcing Bars:	ASTM A615, Grade 60, Deformed. Re-bars shall be as shown on plans with yield stress of 40,000 PSI. Continuous bars shall be bent around corners, ends lapped 24". Provide 3" minimum cover for re-bars.
Welded Wire Fabric:	ASTM A185, Welded steel wire fabric.
Cement Parging:	3/4" thick cement plaster parge coat over foundation wall down to footings.

04000 MASONRY

- Contractor shall provide necessary labor, materials and equipment to lay up masonry as shown or specified in these documents. All work shall be laid plumb, true and square with filled joints.
- A. Mortar for unit masonry: comply with ASTM C270, proportion specification.
- B. Grout for unit masonry: comply with ASTM C476 for grout of reinforced and non-reinforced unit masonry.
- C. All walls shall be adequately braced until securely tied to the structure. No work shall be done subject to freezing conditions.

D. Materials:

- Block:** CMU ASTM C90 filled solid with mortar where shown, Grade N.
- Mortar:** Type N at exterior load bearing and non-load bearing walls. Provide type S below grade. Provide non-shrink non-metallic leveling grout.
- Grout:**
- Ladder Reinforcing:** Provide 9 gage horizontal ladder type reinforcing installed every other course of CMU basement walls typical.
- Stone:** To be selected by Owner.

05000 METALS

Contractor shall provide all necessary labor, materials and equipment to erect all miscellaneous iron and steel as detailed or noted on these drawings.

- A. All structural steel shall be detailed and fabricated in accordance with the latest edition of the AISC Manual of Steel Construction. Use standard framed beams unless otherwise noted.
- B. Structural steel shall conform to ASTM A36 and ASTM A572 except pipe columns, which shall conform to ASTM A53.
- C. Metal J mold trim, beam caps, foundation caps to be 22 Ga. galvanized metal by local craftsmen.
- D. Carpenter's Iron Work consist of bolts, plates, anchors, hangers, columns, dowels, etc., required for framing.
- E. Anchor bolts shall be 1/2" dia. x 18" hot dipped galvanized steel. Locate not more than 6'-0" on center and a maximum of 12" from the end or corner. Provide a minimum of two [2] per sill. Conform to ASTM A307.

06000 CARPENTRY

Contractor shall provide all labor, material and equipment to frame up, sheath and trim out the building as shown or specified in these documents.

- A. Framing lumber shall be kiln-dried Hem fir, No. 1, Structural grade and Truss Joist where indicated.

Fb=1,200 PSI
E=1,500,000.

- B. All framing connections to be Simpson. Stainless steel connectors and Stainless steel nails are to be used where in contact with ACQ treated wood. The contractor has the option to install Simpson "Z Max" galvanized connectors with hot dipped galvanized nails.

C. All wood resting on masonry or concrete shall be ACQ treated with stainless steel fasteners.

D. Headers: Unless otherwise noted:

3'-4' span	[2]2x8
5'-6' span	[2]2x10
7'-8' span	[2]2x12

E. Provide solid bridging under all perpendicular partitions.

F. Double joists under all parallel partitions.

G. Provide wood cross bracing at floor joist mid-spans typical.

H. Materials

Sheathing:	APA sub-floor 3/4" T&G Plywood glued and nailed. Roof: 1/2" CDX 32/16 plywood Wall: 1/2" CDX 32/16 plywood
Soffit:	Vented vinyl
Interior trim	Paint grade colonial trim. 3 1/2" colonial base 2 1/2" window and door casing through out.

07000 THERMAL AND MOISTURE PROTECTION

Contractor shall provide all labor, materials and equipment to install insulation, roof and waterproofing as detailed in these documents.

A. Batt Insulation to be fiberglass or mineral type craft faced one side, Fed Spec. HH-I-521C, Type 1, Class B, R-Value as indicated on drawings.

B. Below grade damp-proofing 2-coat bituminous mastic over previously coated cement plaster parging.

C. Fiberglass shingles to be "GAF Timberline" 30 year class A Fiberglass. Provide "Grace" ice and water shield at eaves and valleys. Conform to ASTM D3462 and provide min. of 6 fasteners per shingle.

D. Metal flashing and trim to be as scheduled below over all windows and doors in exterior walls throughout and at roof and vertical wall intersections. Provide pan flashing under all exterior doors. Provide flashing where concrete is in contact with wood framing and coat contact between flashing and concrete with bitumen.

Head Flashing	.024" aluminum
Exposed Flashing	.019" aluminum
Concealed Flashing	.015" aluminum

E. Caulking to be 2-part polysulfide at exterior expansion joints in pavement or slabs abutting building. Silicone sealant at all other joints in building necessary to make watertight.

08000 DOORS, WINDOWS AND HARDWARE

Contractor shall supply and install all doors, windows and glazing as detailed, scheduled, and/or specified in these documents.

- A. Doors (interior) to be solid core "Masonite", 6 panel colonial style with smooth finish.
- B. Hardware to be Residential Fed. Spec. 160, standard weight, Kwikset style and finish as selected by owner.
- C. Windows to be "Anderson" double hungs of size and dimension indicated on drawings; weather-stripped, locks and screens. Provide interior wood grilles on all units.
- D. Garage doors to be "Clopay", metal insulated panel doors with 20 year warranty. Provide Lift-Master garage door openers 1/3 hp.

09000 FINISHES

Contractor shall provide all materials and labor to finish interior rooms and buildings exterior, as shown, noted, scheduled or specified in these documents.

- A. Gypsum dry wall to conform to ASTM C36. Fire-code type "X" where indicated on documents.
- B. Water-resistant Backing Gypsum Board to conform to ASTM C630. Water resistant type at wet spaces, Apply with double nailing system, 12" on center.
- C. Ceramic tile areas to receive 1/2" cement board typical.

D. Painting :

Exterior wood ; door and window trim, house trim, etc.	1 enamel primer 1 enamel paint
Exterior metal [doors and other ferrous metals]	1 coat zinc chromate primer 1 coat enamel exterior
Interior [doors and trim].	2 coats latex semi-gloss

Interior partitions

1 coat latex primer
2 coats latex paint

14000 MECHANICAL

General: All Heating, Ventilating and Air Conditioning work as per local and governmental departments having jurisdiction as well as any requirements of the NFPA, UL and other applicable codes. Contractor shall secure all permits, inspections and obtain certificate of approval.

15000 PLUMBING

General: All plumbing work as per National Standard Plumbing Code and local jurisdiction. Contractor shall secure all permits, inspections and obtain certificate of approval. Pipes, fittings and valves as per code requirements. All toilet fixtures to be elongated type.

All supply domestic piping to be copper type M.

All drainage piping to be CPVC Type DWV.

All plumbing work to be pressure tested per building code and local requirements.

16000 ELECTRICAL

General:

All electrical work as per Local and Governmental departments having jurisdiction as well as any requirements of the NFPA, UL, NEC and other applicable codes. All materials to bear the UL label. Contractor shall secure all permits, inspections and obtain certificate of approval.

Smoke detectors to be Interconnected Photoelectric Eye Type or Ionization Chamber type. UL tested, approved and labeled. Furnish A.C. operated units with battery back-up where indicated in these documents. Furnish owner with care and maintenance instructions.

Provide Carbon Monoxide detector alarm units in close proximity to all bedrooms. Units to be UL tested, approved and labeled. Furnish A.C. operated units with battery back-up where indicated in these documents. Furnish owner with care and maintenance instructions.

TABLE R602.3(1)
FASTENER SCHEDULE FOR STRUCTURAL MEMBERS

DESCRIPTION OF BUILDING ELEMENTS	NUMBER AND TYPE OF FASTENERS	SPACING OF FASTENERS
Joist to sill or girder, toe nail	3-8d	—
1" x 6" subfloor or less to each joist, face nail	2-8d 2 staples, 1 1/2"	—
2" subfloor to joist or girder, blind and face nail	2-16d	—
Sole plate to joist or blocking, face nail	16d	16" o.c.
Top or sole plate to stud, end nail	2-16d	—
Stud to sole plate, toe nail	3-8d or 2-16d	—
Double studs, face nail	10d	24" o.c.
Double top plates, face nail	10d	24" o.c.
Sole plate to joist or blocking at braced wall panels	3-16d	16" o.c.
Double top plates, minimum 24-inch offset of end joints, face nail in lepped area	8-16d	—
Blocking between joists or rafters to top plate, toe nail	3-8d	—
Rim joist to top plate, toe nail	8d	6" o.c.
Top plates, laps at corners and intersections, face nail	2-10d	—
Build-up header, two pieces with 1/2" spacer	16d	16" o.c. along each edge
Continued header, two pieces	16d	16" o.c. along each edge
Ceiling joists to plate, toe nail	3-8d	—
Continuous header to stud, toe nail	4-8d	—
Ceiling joist, laps over partitions, face nail	3-10d	—
Ceiling joist to parallel rafters, face nail	3-10d	—
Rafter to plate, toe nail	2-16d	—
1" brace to each stud and plate, face nail	2-8d 2 staples, 1 1/2"	—
1" x 6" sheathing to each bearing, face nail	2-8d 2 staples, 1 1/2"	—
1" x 8" sheathing to each bearing, face nail	2-8d 3 staples, 1 1/2"	—
Wider than 1" x 8" sheathing to each bearing, face nail	3-8d 4 staples, 1 1/2"	—
Build-up corner studs	10d	24" o.c.
Build-up girder and beams, 2-inch lumber layers	10d	Nail each layer as follows: 32" o.c. at top and bottom and staggered. Two nails at ends and at each splice.
2" planks	2-16d	At each bearing
Roof rafters to ridge, valley or hip rafters: toe nail	4-16d 3-16d	—
Rafter ties to rafters, face nail	3-8d	—
Wood structural panels, subfloor, roof and wall sheathing to framing		
1/2" x 1/2"	6d common nail (subfloor, wall)	12"
1/2" x 1"	8d common nail (roof)	12"
1 1/2" x 1 1/2"	8d common nail	12"
	10d common nail or 8d deformed nail	12"

(continued)

RONALD E. RHEAUME, AIA

6-0-9-2-0-8-0-8-8-4

4 Hidden Hollow Drive
Yardville, New Jersey 08620

ARCHITECT

FASTENER
SCHEDULE

Date

Project Number

NJ License No. 10071

Checked

Drawing Number

TABLE R602.3(1)—continued
FASTENER SCHEDULE FOR STRUCTURAL MEMBERS

DESCRIPTION OF BUILDING MATERIALS	DESCRIPTION OF FASTENER ^{a,b,c,d}	SPACING OF FASTENERS	
		Edges (inches) ^f	Intermediate supports ^{e,g} (inches)
Other wall sheathing ^h			
1/2" regular cellululosic fiberboard sheathing	1 1/2 galvanized roofing nail 6d common nail staple 16 ga., 1 1/2 long	3	6
1/2 structural cellululosic fiberboard sheathing	1 1/2 galvanized roofing nail 8d common nail staple 16 ga., 1 1/2 long	3	6
1 1/2 structural cellululosic fiberboard sheathing	1 1/2 galvanized roofing nail 8d common nail staple 16 ga., 1 1/2 long	3	6
1/2 gypsum sheathing	1 1/2 galvanized roofing nail; 6d common nail; staple galvanized, 1 1/2 long; 1 1/4 screws, Type W or S	4	8
1/2 gypsum sheathing	1 1/2 galvanized roofing nail; 8d common nail; staple galvanized, 1 1/2 long; 1 1/4 screws, Type W or S	4	8
Wood structural panels, combination subfloor underlayment to framing			
3/4 and less	6d deformed nail or 8d common nail	6	12
3/4-1"	8d common nail or 8d deformed nail	6	12
1 1/4-1 1/2	10d common nail or 8d deformed nail	6	12

For SI: 1 inch = 25.4 mm, 1 foot = 304.8 mm, 1 mile per hour = 1.609 km/h.

a. All nails are smooth-shank, box or deformed shanks except where otherwise stated.

b. Staples are 16 gage wire and have a minimum 1/4-inch on diameter crown width.

c. Nails shall be spaced at not more than 6 inches on center at all supports where spans are 48 inches or greater.

d. Four-foot by 8-foot or 4-foot by 8-foot panels shall be applied vertically.

e. Spacing of fasteners not included in this table shall be based on Table R602.3(1).

f. For regions having basic wind speed of 110 mph or greater, 8d deformed nails shall be used for attaching plywood and wood structural panel roof sheathing to framing within minimum 48-inch distance from gable end walls. If mean roof height is more than 25 feet, up to 35 feet maximum.

g. For regions having basic wind speed of 100 mph or less, nails for attaching wood structural panel roof sheathing to gable end wall framing shall be spaced 6 inches on center. When basic wind speed is greater than 100 mph, nails for attaching panel roof sheathing to intermediate supports shall be spaced 6 inches on center for minimum 48-inch distance from ridges, eaves and gable end walls, and 4 inches on center to gable end wall framing.

h. Gypsum sheathing shall conform to ASTM C 79 and shall be installed in accordance with CA 253. Fiberboard sheathing shall conform to either AIA 194.1 or ASTM C 208.

i. Spacing of fasteners on floor sheathing panel edges applies to panel edges supported by framing members and at all floor perimeter only. Spacing of fasteners on roof sheathing panel edges applies to panel edges supported by framing members and at all roof plane perimeter. Blocking of roof or floor sheathing panel edges perpendicular to the framing members shall not be required except at intersection of adjacent roof planes. Floor and roof perimeter shall be supported by framing members or solid blocking.

RONALD E. RHEAUME, AIA

6 0 9 - 2 0 8 - 0 8 8 4

4 Hidden Hollow Drive

Yardville, New Jersey 08620

A R C H I T E C T

FASTENER
SCHEDULE CONT.

Date

Project Number

Checked

N.J. License No. 10021

Drawing Number

TABLE R602.3(2)
ALTERNATE ATTACHMENTS

NOMINAL MATERIAL THICKNESS (inches)	DESCRIPTION ^a OF FASTENER AND LENGTH (inches)	SPACING ^c OF FASTENERS (inches)	
		Edges	Intermediate supports
Wood structural panels subfloor, roof and wall sheathing to framing and particleboard wall sheathing to framing ^d			
1/4	0.097 - 0.099 Nail 1 1/4, Staple 15 ga. 1 1/4, Staple 16 ga. 1 1/4	6	12
1/4	Staple 15 ga. 1 1/4	6	12
1/4	0.097 - 0.099 Nail 1 1/4, Staple 16 ga. 1 1/4	4	10
1/4	Staple 16 ga. 1 1/4	6	12
1/4 and 1/4	Staple 15 ga. 1 1/4, 0.097 - 0.099 Nail 1 1/4	3	6
1/4 and 1/4	Staple 16 ga. 1 1/4	6	12
1/4 and 1/4	0.113 Nail 1 1/4, Staple 15 and 16 ga. 1 1/4	6	12
1/4 and 1/4	0.097 - 0.099 Nail 1 1/4, Staple 14 ga. 1 1/4	3	6
1/4 and 1/4	Staple 15 ga. 1 1/4	5	10
1/4 and 1/4	0.097 - 0.099 Nail 1 1/4, Staple 16 ga. 2	3	6
1/4 and 1/4	Staple 16 ga. 2	4	8
1/4 and 1/4	Staple 14 ga. 2	5	10
1/4 and 1/4	0.113 Nail 2 1/4, Staple 15 ga. 2	4	8
1/4 and 1/4	0.097 - 0.099 Nail 2 1/4	3	6
		SPACING ^c OF FASTENERS (inches)	
NOMINAL MATERIAL THICKNESS (inches)	DESCRIPTION ^a OF FASTENER AND LENGTH	Edges	Body of panel ^b
Floor underlayment: plywood-harboard-particleboard ^d			
Plywood			
1/4 and 1/4	1 1/4 ring or screw shank nail—minimum 12 1/4 ga. (0.097) shank diameter	3	6
1/4, 1/4, 1/4 and 1/4	Staple 18 ga., 1/4 long, 1/4 crown	2	3
1/4, 1/4, 1/4 and 1/4	1 1/4 ring or screw shank nail—minimum 12 1/4 ga. (0.097) shank diameter	6	8
1/4, 1/4, 1/4 and 1/4	1 1/4 ring or screw shank nail—minimum 12 1/4 ga. (0.097) shank diameter	6	12
1/4	Staple 16 ga. 1 1/4	6	8
Harboard ^d			
1/4	1 1/4 long, flat-grooved underlayment nail	6	6
1/4	4d cement-coated sinker nail	6	6
1/4	Staple 18 ga., 1/4 long (plastic coated)	3	6
Particleboard			
1/4	4d ring-grooved underlayment nail	3	6
1/4	Staple 18 ga., 1/4 long, 1/4 crown	3	6
1/4	6d ring-grooved underlayment nail	6	10
1/4	Staple 16 ga., 1 1/4 long, 1/4 crown	3	6
1/4	6d ring-grooved underlayment nail	6	10
1/4	Staple 16 ga., 1 1/4 long, 1/4 crown	3	6

For S1: 1 inch = 25.4 mm.

- a. Nail is a general description and may be T-head, modified round head or round head.
b. Staples shall have a minimum crown width of 7/8 inch on diameter except as noted.
c. Nails or staples shall be spaced at not more than 6 inches on center at all supports where spans are 48 inches or greater. Nails or staples shall be spaced at not more than 12 inches on center at least.
d. Fasteners shall be placed in a grid pattern throughout the body of the panel.
e. For 5-ply panels, intermediate nails shall be spaced not more than 12 inches on center each way.
f. Harboard underlayment shall conform to ANSI/APA A135.4.

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INTERNATIONAL RESIDENTIAL CODE 2000, NEW JERSEY EDITION

RONALD E. RHEAUME, AIA
609-208-0884

4 Hidden Hollow Drive
Yardville, New Jersey 08820

ARCHITECT

FASTENER
SCHEDULE
ALTERNATE

Date	Project Number	NJ License No. 10071	Checked
Drawing Number			

NARROW WALL OVER RAISED WOOD FLOOR OR SECOND FLOOR - FRAMING ANCHOR OPTION(a)

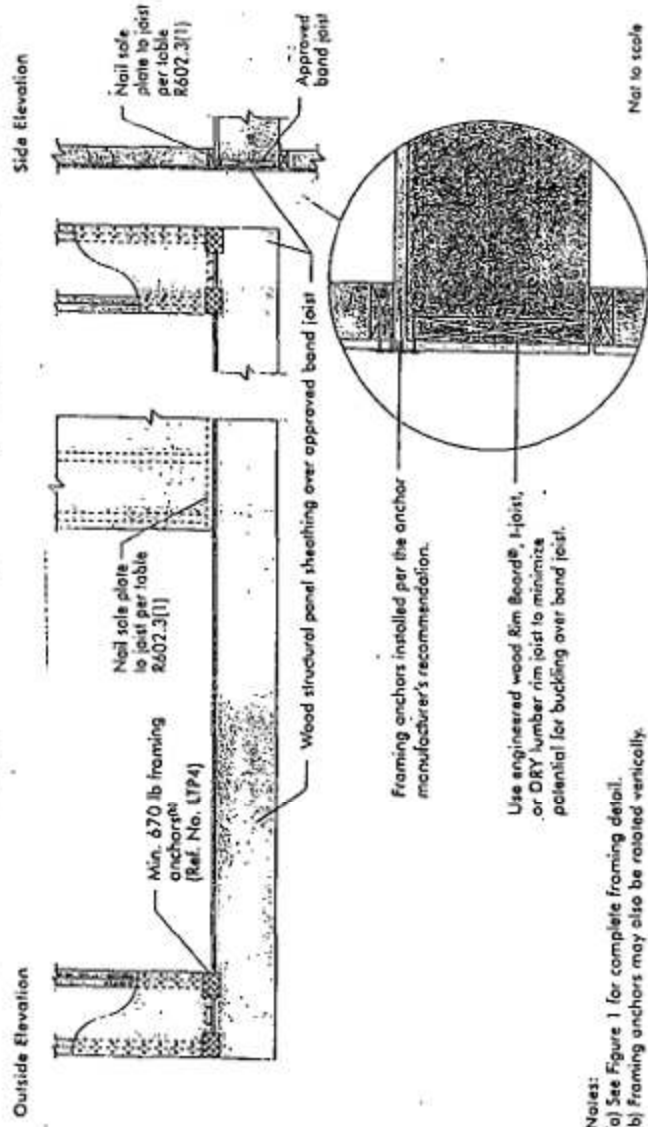
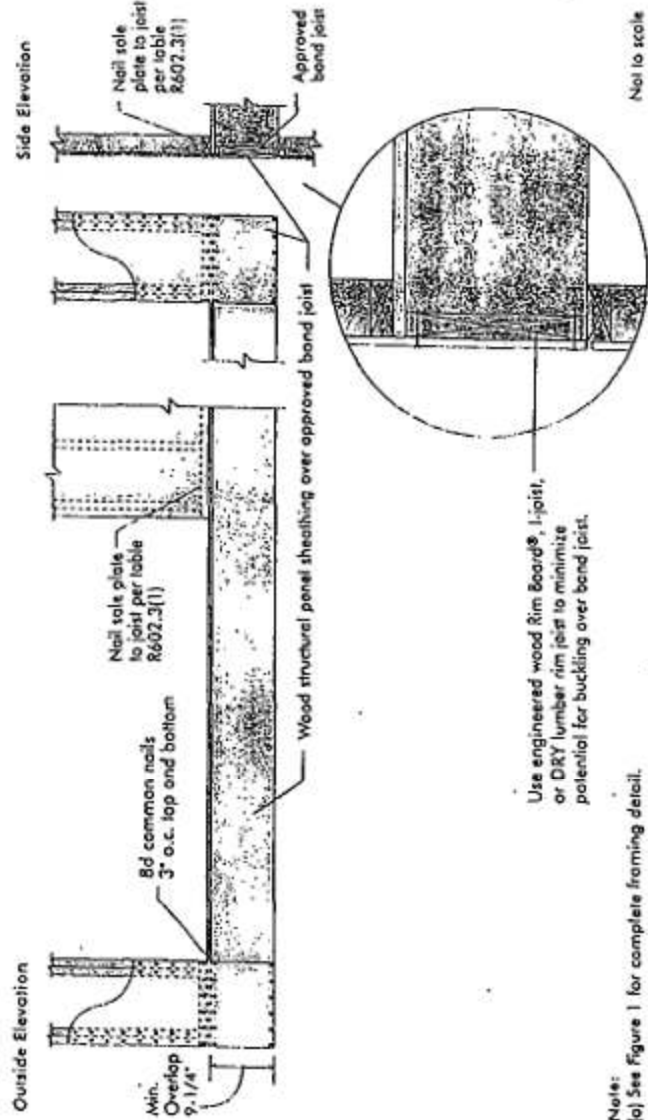


FIGURE 4

NARROW WALL OVER RAISED WOOD FLOOR OR SECOND FLOOR - WOOD STRUCTURAL PANEL OVERLAP OPTION(b)



Note:
(a) See Figure 1 for complete framing detail.

RONALD E. RHEAUME, AIA
6-0-9-2-0-8-0-8-8-4

4 Hidden Hollow Drive
Yardville, New Jersey 08620

BRACED WALL
CONSTRUCTION DETAILS

Date	Project Number	Checked
	NJ License No. 10001	
		Drawing Number

NARROW WALL OVER CONCRETE OR MASONRY BLOCK FOUNDATION

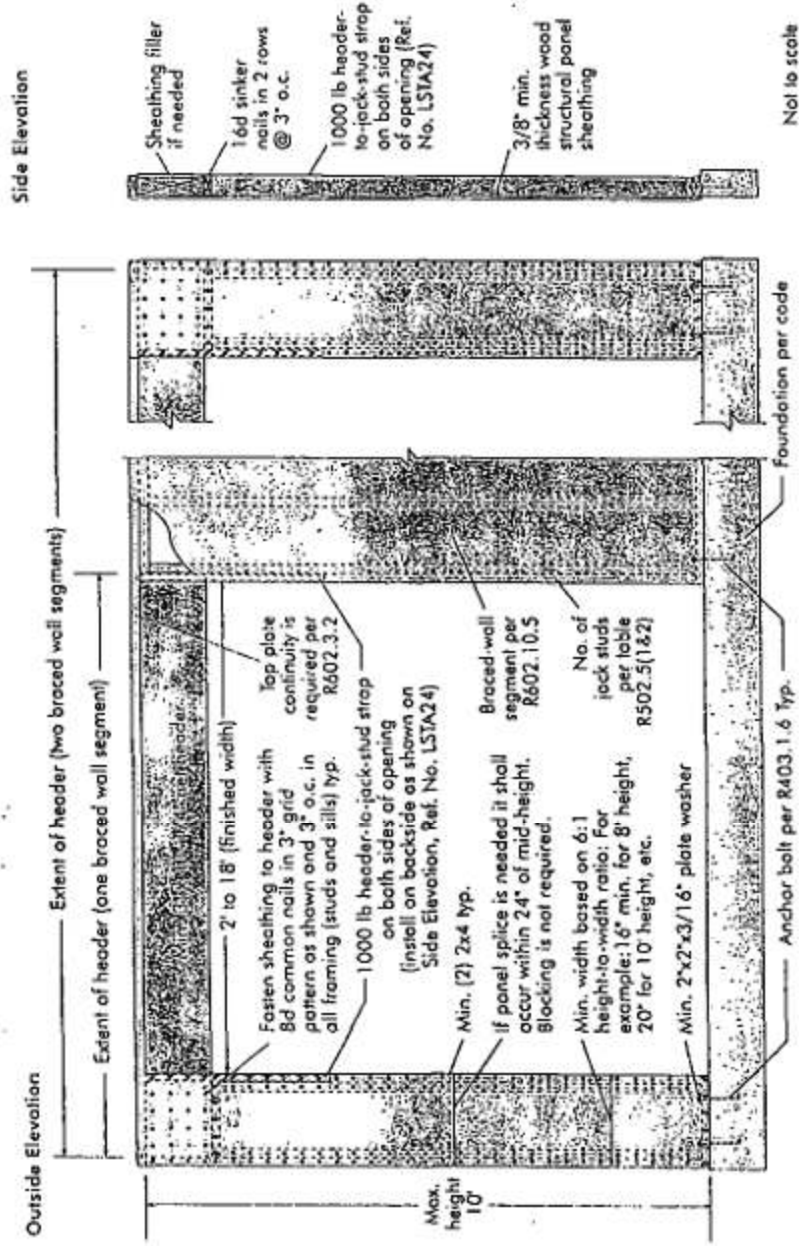
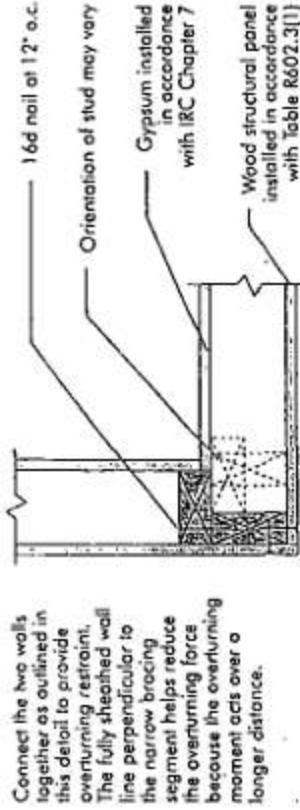


FIGURE 2
EXAMPLE OF OUTSIDE CORNER DETAIL



RONALD E. RHEAUME, AIA
609-208-0884

4 Hidden Hollow Drive
Yardville, New Jersey 08620

ARCHITECT

BRACED WALL
CONSTRUCTION DETAILS

Date

Project Number

Checked

NJ License No. 10021

Drawing Number

NARROW WALL OVER CONCRETE OR MASONRY BLOCK FOUNDATION

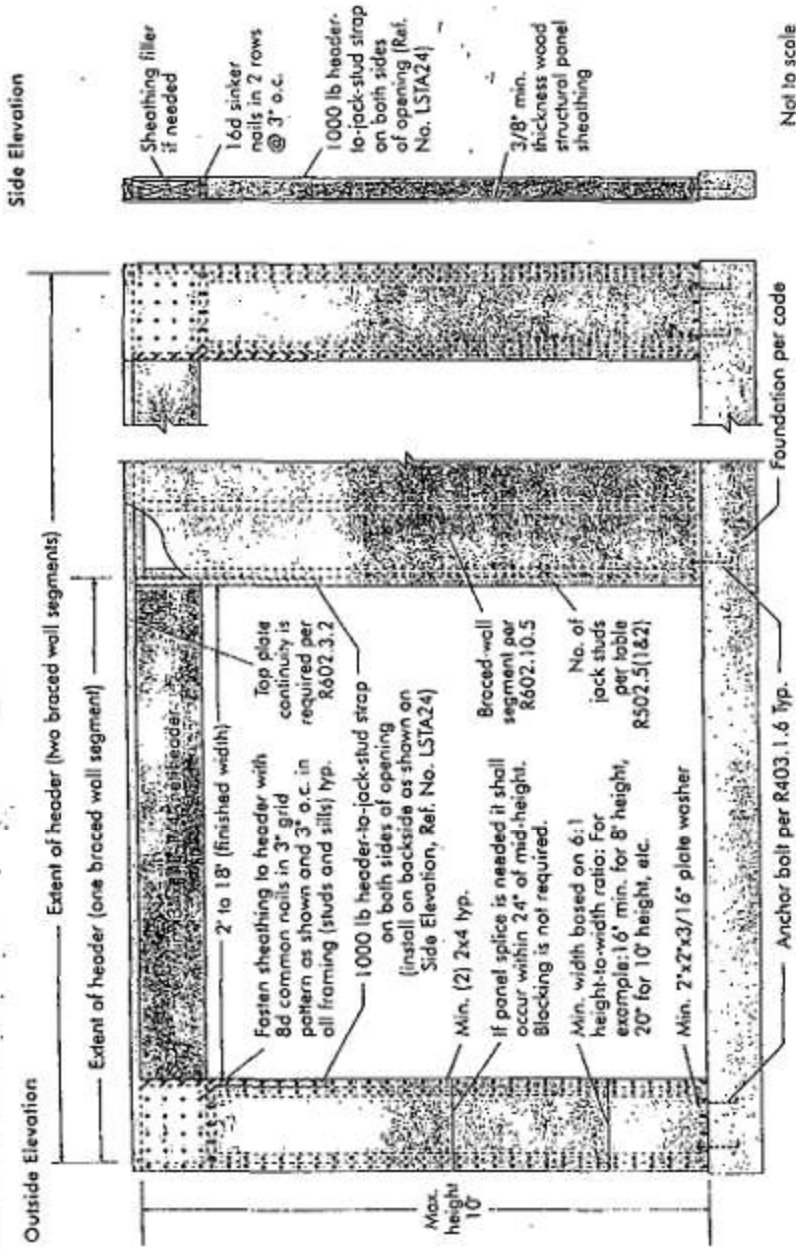
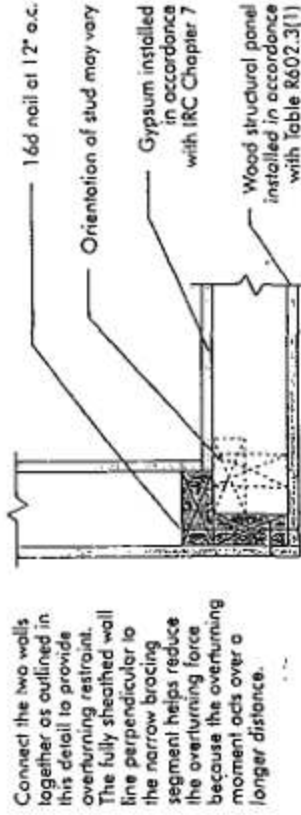


FIGURE 2
EXAMPLE OF OUTSIDE CORNER DETAIL



RONALD E. RHEAUME, AIA
609-208-0884

4 Hidden Hollow Drive
Yardville, New Jersey 08820

ARCHITECT

BRACED WALL
CONSTRUCTION DETAILS

6/5/02

Date	Project Number	Checked
N.J. License No. 10071		
Drawing Number		

Attention!

Anchor straps must be separated before
the concrete is poured!

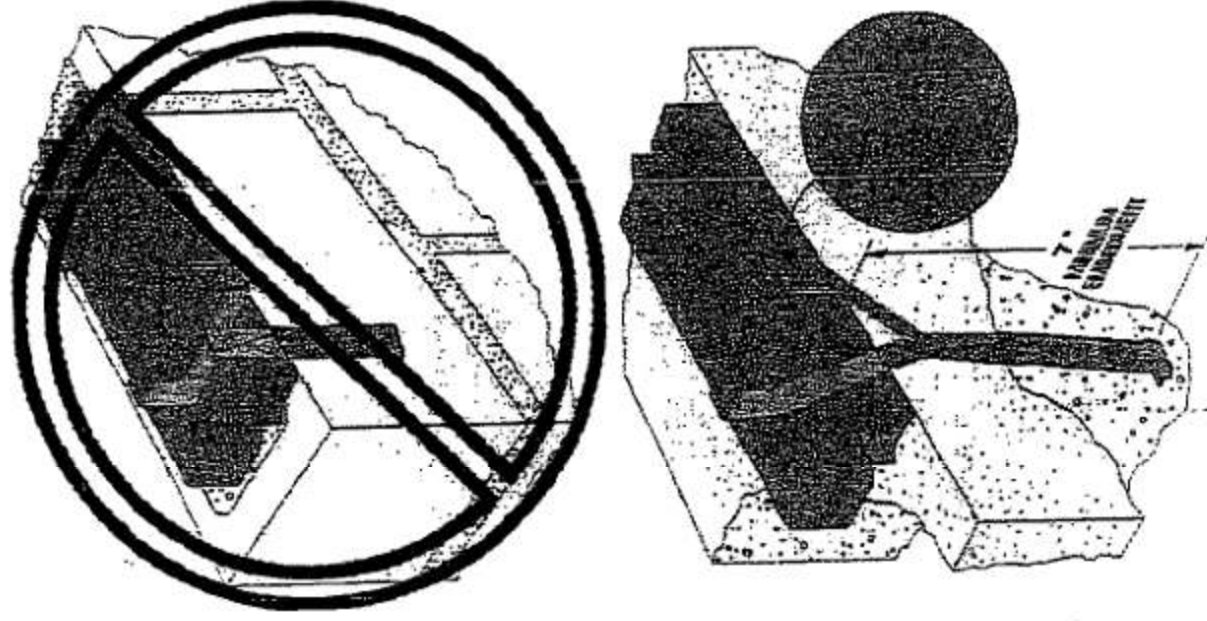


Figure 55. Valley Rafter Roof Framing

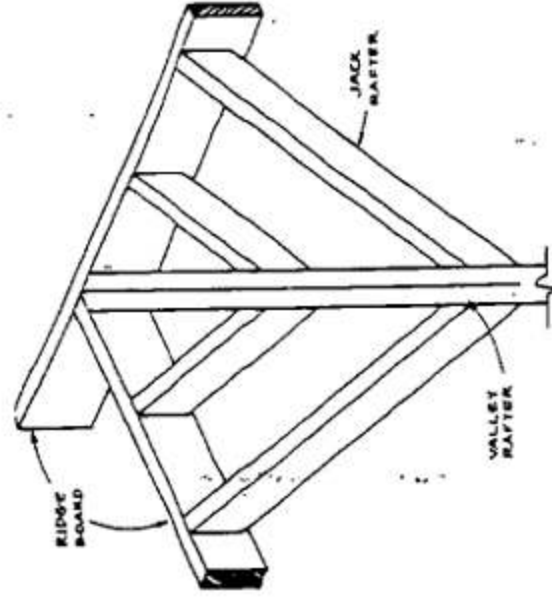


Figure 56. Hip Rafter Roof Framing

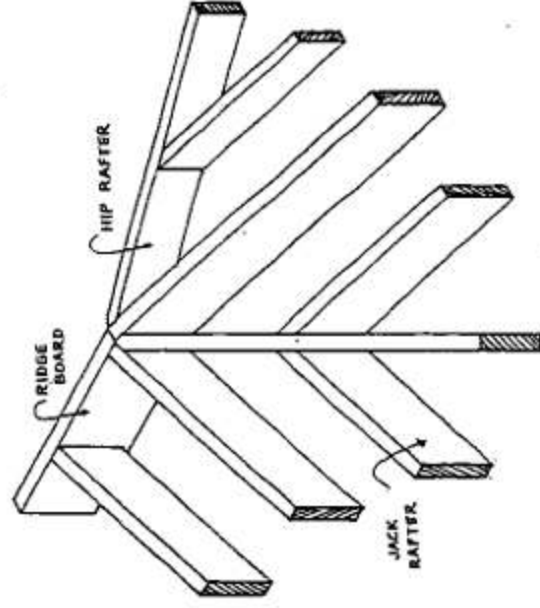
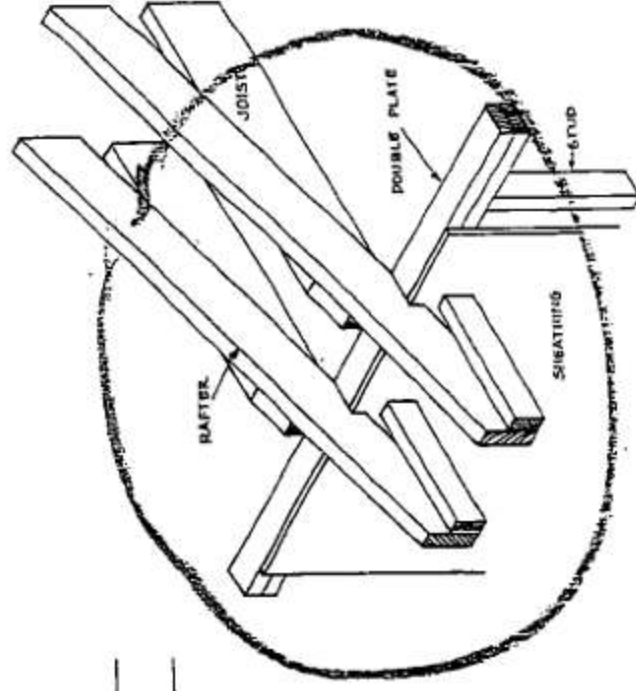


Figure 57. Roof Framing at Eave



PERMIT # _____

LOT: _____ BLOCK: _____

FRAMING CHECKLIST

Instructions: Builder or Builder's representative checks boxes marked 'B'. Building Inspector checks boxes marked 'I'. Responsible Person in Charge of Work signs, initials and dates in spaces provided. Building Inspector initials and dates in spaces provided.

NOTE: ALL ITEMS SHOULD BE AS SHOWN ON THE PLANS OR AS REQUIRED BY CODE.

A. BASEMENT OR CRAWL SPACE

1. ANCHORAGE:

BOLTS

☐ ☐ SPACING
☐ ☐ SIZE

STRAPS

☐ ☐ SPACING (PER MANUFACTURER'S SPECS)
☐ ☐ SIZE

2. SILL PLATES:

☐ ☐ SIZE
☐ ☐ GRADE, SPECIES
☐ ☐ TREATMENT
☐ ☐ LAPS
☐ ☐ SILL SEALER
☐ ☐ PROPER TREATMENT OVER FOUNDATION OPENINGS (BEARING OF JOIST)
☐ ☐ TERMITE PROTECTION

3. BEAM POCKETS:

☐ ☐ BEARING/SHIMS
☐ ☐ TERMITE PROTECTION OR CLEARANCE

4. COLUMNS:

☐ ☐ SIZED PER PLAN
☐ ☐ ATTACHMENT/PLATES
☐ ☐ SPACING/LOCATION
☐ ☐ PAINT/COATING

B. FLOOR FRAMING AND FLOORING

1. BOX OR RIM JOIST, OR PERIMETER BAND JOIST:

1 ST	2 ND	3 RD	FLOOR
☐ ☐	☐ ☐	☐ ☐	SIZE
☐ ☐	☐ ☐	☐ ☐	GRADE, SPECIES
☐ ☐	☐ ☐	☐ ☐	SINGLE OR DOUBLE
☐ ☐	☐ ☐	☐ ☐	PRE-ENGINEERED PER MANUFACTURER'S SPECS
☐ ☐	☐ ☐	☐ ☐	CANTILEVERS AS PER DESIGN

2. GIRDERS AND BEAMS:

☐ ☐ SIZED PER PLAN
☐ ☐ TYPE
☐ ☐ GRADE, SPECIES
☐ ☐ LOCATION AND RELATION TO THE PLAN
☐ ☐ NAILING
☐ ☐ ATTACHMENT SCHEDULE
☐ ☐ BEARING
☐ ☐ LAPPING

3. FLOOR JOIST:

1 ST	2 ND	3 RD	FLOOR
☐ ☐	☐ ☐	☐ ☐	SIZED PER PLAN
☐ ☐	☐ ☐	☐ ☐	GRADE, SPECIES
☐ ☐	☐ ☐	☐ ☐	PRE-ENGINEERED COMPONENTS AS SPECIFIED
☐ ☐	☐ ☐	☐ ☐	BEARING
☐ ☐	☐ ☐	☐ ☐	NAILING
☐ ☐	☐ ☐	☐ ☐	BRIDGING
☐ ☐	☐ ☐	☐ ☐	CUTTING AND NOTCHING (AS PER CODE)
☐ ☐	☐ ☐	☐ ☐	POINT LOADS - SUPPORTED AS PER PLAN
☐ ☐	☐ ☐	☐ ☐	SPAN HANGERS
☐ ☐	☐ ☐	☐ ☐	HEADERS
☐ ☐	☐ ☐	☐ ☐	FRAMED OPENINGS

4. FLOORING, SHEATHING, OR DECKING:

1 ST	2 ND	3 RD	FLOOR
☐ ☐	☐ ☐	☐ ☐	MATERIAL
☐ ☐	☐ ☐	☐ ☐	PANEL SPAN, THICKNESS

5. STAIR ATTACHMENT:

1 ST	2 ND	3 RD	FLOOR
☐ ☐	☐ ☐	☐ ☐	BEARING
☐ ☐	☐ ☐	☐ ☐	NAILING

SPECIAL REQUIREMENTS

☐ ☐ ☐ ☐ EDGE BLOCKING (IF REQUIRED)
☐ ☐ ☐ ☐ GAPPING
☐ ☐ ☐ ☐ LAYOUT

I hereby certify that I inspected this building using this checklist and it conforms to the released plans and to the requirements of the Uniform Construction Code, N.J.A.C. 5:23.

Responsible Person in Charge of Work: _____ Date: _____

Building Inspector
Initials: _____

Date: _____

C. WALL FRAMING

1. EXTERIOR WALL FRAME:

1 st	2 nd	3 rd	FLOOR
☐	☐	☐	SIZE
☐	☐	☐	SPACE
☐	☐	☐	SPECIES AND GRADE
☐	☐	☐	CUTTING, NOTCHING, AND BORING
☐	☐	☐	HEADER SIZES
☐	☐	☐	JACK STUD BEARING
☐	☐	☐	TOP PLATES
☐	☐	☐	NAILING
☐	☐	☐	LAPS
☐	☐	☐	RAFTER TIES
☐	☐	☐	HURRICANE STRAPS

D. ROOF FRAMING

1. TRUSS ROOF FRAMING (AS PER DESIGN):

☐	☐	☐	LAYOUT PLANS
☐	☐	☐	TRUSS MEMBERS
☐	☐	☐	CONNECTION SCHEDULE
☐	☐	☐	PERMANENT BRACING DETAILS
☐	☐	☐	DORMERS/ROOF STRUCTURES ON MANUFACTURER'S DRAWINGS
☐	☐	☐	EQUIPMENT/APPLIANCES ON MANUFACTURER'S DRAWINGS
☐	☐	☐	LOCATION AS PER LAYOUT
☐	☐	☐	ALIGNMENT
☐	☐	☐	BEARING
☐	☐	☐	SPACING
☐	☐	☐	CONNECTIONS TO BEARING POINTS
☐	☐	☐	NO CONNECTION TO NON-BEARING POINTS
☐	☐	☐	DAMAGE AND DEFECTS
☐	☐	☐	ENGINEERED METHOD OF REPAIR

APPROVED DOCUMENTS WHICH SHOW:

2. SHEATHING - EXTERIOR WALLS:

☐	☐	☐	MATERIAL
☐	☐	☐	PANEL SPAN, THICKNESS
☐	☐	☐	SPECIAL REQUIREMENTS
☐	☐	☐	GAPING, LAYOUT
☐	☐	☐	CORNER BRACING (IF REQUIRED)
☐	☐	☐	CLIPS (IF REQUIRED)

2. INTERIOR LOAD-BEARING WALLS:

1 st	2 nd	3 rd	FLOOR
☐	☐	☐	SIZE
☐	☐	☐	SPACE
☐	☐	☐	LAYOUT - SUPPORT BELOW
☐	☐	☐	SPECIES AND GRADE
☐	☐	☐	CUTTING, NOTCHING, AND BORING
☐	☐	☐	FIRE BLOCKING
☐	☐	☐	HEADER SIZES
☐	☐	☐	JACK STUD BEARING
☐	☐	☐	TOP PLATES
☐	☐	☐	NAILING
☐	☐	☐	LAPS
☐	☐	☐	STRAPPING

2. PERMANENT TRUSS-TO-TRUSS BRACING (AS PER DESIGN):

☐	☐	☐	LAYOUT
☐	☐	☐	SIZE
☐	☐	☐	TYPE
☐	☐	☐	NAILING
☐	☐	☐	OVERLAP
☐	☐	☐	TERMINATION
☐	☐	☐	TRANSITION (I.E., CROSS) BRACING

3. GABLE END BRACING (AS PER DESIGN):

☐	☐	☐	LAYOUT
☐	☐	☐	SIZE
☐	☐	☐	TYPE
☐	☐	☐	NAILING
☐	☐	☐	OVERLAP
☐	☐	☐	TERMINATION

3. INTERIOR NON-LOAD-BEARING WALLS:

1 st	2 nd	3 rd	FLOOR
☐	☐	☐	SIZE
☐	☐	☐	SPACE
☐	☐	☐	SPECIES AND GRADE
☐	☐	☐	CUTTING, NOTCHING, AND BORING
☐	☐	☐	FIRE BLOCKING
☐	☐	☐	HEADER SIZES
☐	☐	☐	TOP PLATE NAILING

4. SOLID SAWN ROOF FRAMING:

☐	☐	☐	SIZE
☐	☐	☐	GRADES, SPECIES
☐	☐	☐	LAYOUT
☐	☐	☐	SPACING
☐	☐	☐	SPAN
☐	☐	☐	BEARING
☐	☐	☐	FASTENING
☐	☐	☐	DAMAGE CAUSED BY FASTENERS (RAFTERS NOT SPLIT BY TOENAILS)
☐	☐	☐	CUTTING, NOTCHING, AND BORING
☐	☐	☐	BRIDGING
☐	☐	☐	RIDGE SIZE
☐	☐	☐	HURRICANE TIES WHERE APPLICABLE

2. SHEATHING - ROOF:

☐	☐	☐	MATERIAL
☐	☐	☐	PANEL SPAN, THICKNESS
☐	☐	☐	SPECIAL REQUIREMENTS
☐	☐	☐	BLOCKING, EDGE (IF REQUIRED)
☐	☐	☐	GAPING, LAYOUT
☐	☐	☐	CLIPS (IF REQUIRED)

1. SHEATHING - EXTERIOR WALLS:

☐	☐	☐	MATERIAL
☐	☐	☐	PANEL SPAN, THICKNESS
☐	☐	☐	SPECIAL REQUIREMENTS
☐	☐	☐	GAPING, LAYOUT
☐	☐	☐	CORNER BRACING (IF REQUIRED)
☐	☐	☐	CLIPS (IF REQUIRED)

OFFICE OF AFFORDABLE HOUSING
MANDATORY DEVELOPMENT FEES

BLOCK: 958.21 LOT: 15,16,17
SITE ADDRESS: 436 The Esplanade
CONTROL #: 06-0979 WORK TYPE: Addition/open porch
APPLICANT: Beachcraft PHONE # 732-292-2920
APPLICANT ADDRESS PO Box 455 CITY/STATE/ZIP: Allenwood, NJ 08720

MANDATORY DEVELOPER FEES

☒ Residential is 1%

☐ Commercial is 2%

☐ Waiver Signed for estimated Mandatory Development Fee

Business Name:

The estimated equalized assessed value:

Residential \$130,004.00
Commercial

05/05/2006

Date

The final equalized assessed value at the above referenced site is:

Residential \$ 118,700.00
Commercial

11/05/2007

Date

Prel. Fee (Res) \$ 650.02
Prel. Fee (Comm) \$ -
Waiver Fee(Res. Only)

Final Fee (Res) \$ 536.98
Final Fee (Comm) \$ -

Check # 136
Date Paid 05/15/2006

Check # 4268
Date Paid 12/14/2007

Total Fee Paid (Res) \$ 1,187.00
Total Fee Paid (Com) \$ -

I hereby certify that the above applicant has complied with all rules and regulations of the Office of Affordable Housing and has paid all required fees and charges.


Authorized Signature - Township of Brick



HEAT & GLO.
Where everything comes together

6000 Series[®]
Gas Fireplaces



Above photo: 6000TR-Oak shown with Plymouth maple mantel in custom stain, beige marble and basic front.

Cover and opposite page, bottom left: 6000CF-Oak shown with Cultured Stone's Ohio Cobblefield and DF-6-CFFS front in black finish.

Top: 6000TRXI shown with Plymouth mantel in custom stain, green granite and DF-6-Chad front in pewter finish.

Any style
& every room



Our most popular gas fireplace combines traditional style, full-depth authenticity and exceptional features, making it right for any home — in a size and at a price that fits every project.

Choose from four models: 6000TRXI, 6000CF-Oak, 6000TR-Oak and 6000TV-Oak.

6000TRXI

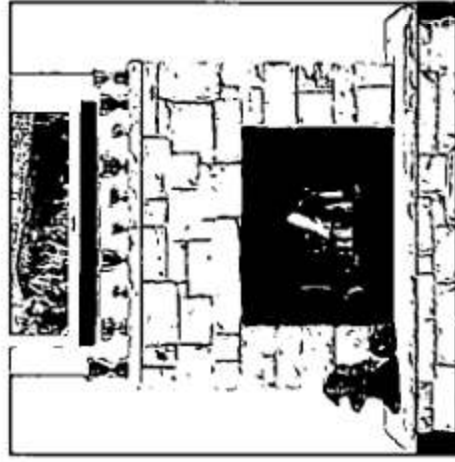
6000TRXI is loaded with high-performance features, like advanced heat management tools.

- Our inventive climate control damper lets you easily manage heat output, from high flame with little heat to AFUE-rated full heat.
- Patented Flame-Out-Of-Log technology and unique, fully concealed Mystifire® burner create a state-of-the-art, multi-level flame.
- Comes standard with energy-saving Intellifire® ignition, authentic weathered brick refractory and popular oak-style logs.



6000TRXI shown with optional DF36-Spire-BZ front in bronze finish and TS-Spire-BZ toolset.

6000 Series

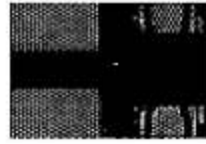


6000CF-Oak delivers a clean face design, allowing surround materials like brick, stone and tile to come flush to the firebox edge for a seamless, masonry-like finish.

6000TR-Oak offers placement flexibility with top or rear venting, plus a variety of finishing options to match any home's style.

6000TV-Oak provides an option for installations, which can't accommodate direct vent systems, by utilizing b-vent off the top.

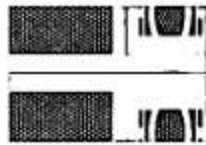
Finishes Five rich finishes. High on style, long on durability. Available on select fronts.



Black



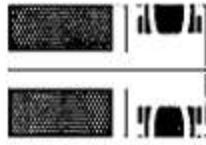
Bronze



Brushed Nickel



Pewter



Polished Brass

Options, options,
more options.



Decorative Fronts

6000TRXI, 6000TR-Oak
and 6000TV-Oak

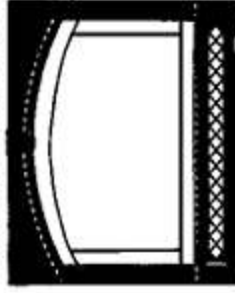
Customize your fireplace with one of these stylish options, each available in various finishes as indicated. Two even accept interchangeable panels.

Basic Front



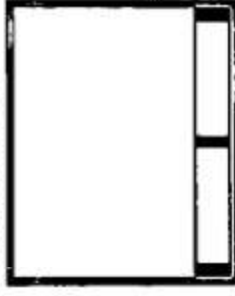
In black, bronze or pewter.
DF-6000

Chateau Deluxe Front



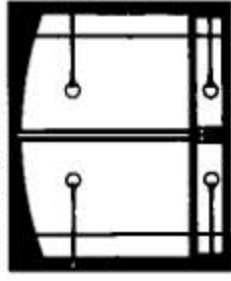
In black, bronze or pewter.
DF-6-CHAD

Firescreen Front

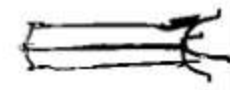


In black, bronze or pewter. Accepts interchangeable decorative panels and Firescreen companions. DF-6-FS

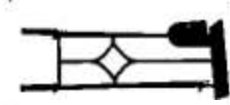
Craftsman Door



In black, bronze or pewter. Comes with matching black andirons.
DF36-CRAFT, requires DF36-AP frame

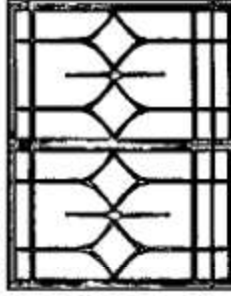


Also available, matching Craftsman tool set in black, bronze or pewter.
TS-CRAFT



Also available, matching Spire tool set in black, bronze or pewter.
TS-SPIRE

Spire Door



In black, bronze or pewter. Accepts interchangeable decorative panels and Firescreen companions.
DF-6-FS, requires DF36-RP frame

Arched Front



In black only. DF-6-CARCH

Essence Doors



Available in all five finishes. Accepts interchangeable decorative panels.
DF-6-ESSENCE

6000CF-Oak (only)

Select your favorite finish and Firescreen companion to make it your own look.

Firescreen Front



In black, bronze or pewter. Accepts Firescreen companions. (Does not accept interchangeable decorative panels)
DF-6-Firescreen

With multiple fronts and finishes, plus interchangeable panels and companions, you can define and design your own style.

Interchangeable Decorative Panels

Firescreen fronts and Essence doors for 6000TRXI, 6000TR-Oak and 6000TV-Oak accept six interchangeable decorative panels. Buy one or several; they're easy to change. Think of them as decorating accessories for different seasons or events. Each is available in five finishes to match or contrast with fronts.



Waverly



North Woods



Mission



Classic



Floral



Victorian



Mission interchangeable panel shown attached to Essence Door.

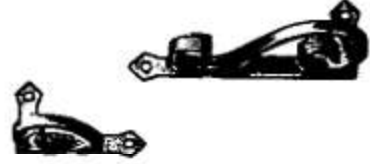
Firescreen Companions The Firescreen front can be enjoyed unadorned, or you can purchase one of these three Firescreen companions to attach to the front's exterior, adding a distinctive touch of corner detail. Each is available in black, bronze or pewter to match or contrast with the front.



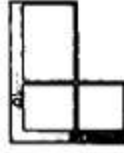
Arbor Creek companions set shown on Firescreen front



Carriage Hill companions set shown on Firescreen front

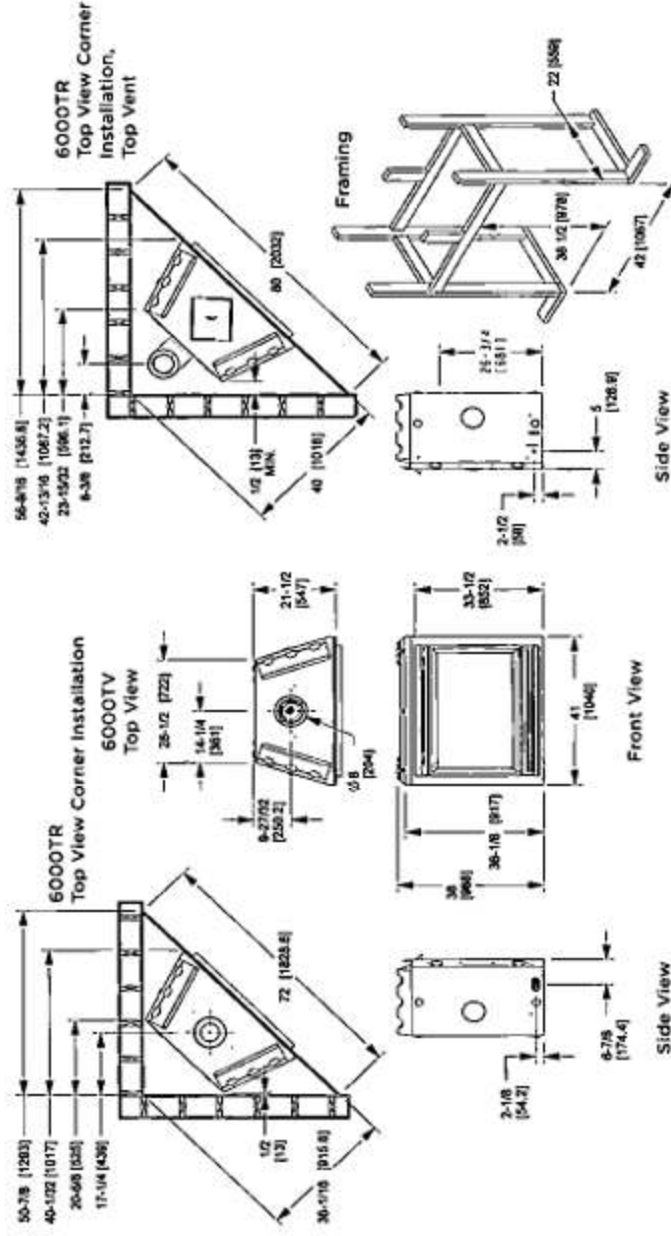


Prairie Ridge companions set shown on Firescreen front



6000TRX1, 6000TR-Oak and 6000TV-Oak Specifications

MODEL	HEIGHT		FRONT WIDTH		BACK WIDTH		DEPTH		GLASS SIZE	BTU INPUT (Btu/hour)
	Actual	Framing	Actual	Framing	Actual	Framing	Actual	Framing		
6000TRX1									36 x 24-3/4	6000TRX1 16,000-40,000
6000TR-Oak	38	38-1/2	41	42	28-1/2	42	21-1/2	22		6000TR-Oak 18,500-30,000
6000TV-Oak										6000TV-Oak 18,000-27,000



Dimensions above are in inches. Reference dimensions only. We recommend measuring individual units at installation. Assumes the use of 1/2" Sheetrock. NOTE: Non-combustible material is allowed over this dimension. Make sure you do NOT cover the decorative door opening.

Refer to installation manual for detailed specifications on installing this product. Heat & Glo reserves the right to update units periodically. The flame and ember appearance may vary based on the type of fuel burned and the venting configuration used. Pictures in this brochure are not a true representation of the fireplace and/or flames.

6000TRX1 Features

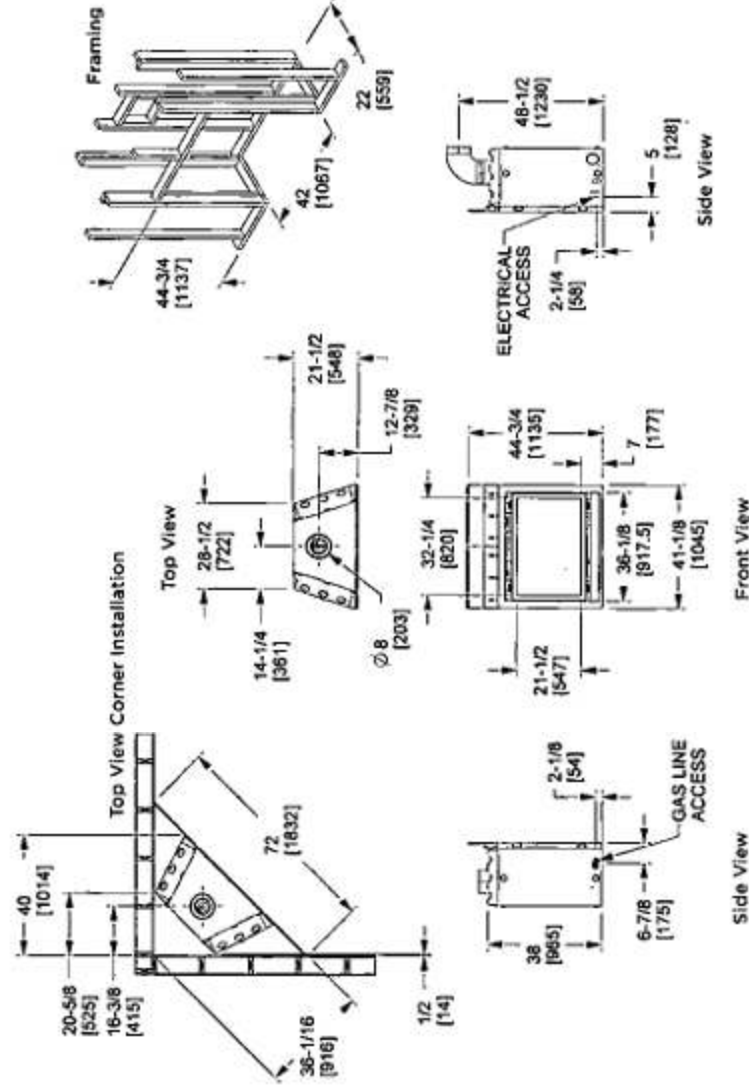
- Climate Control Package:
 - Climate control damper
 - On/off switch for Flame-Out-Of-Log technology
 - Custom control panel
 - Wall thermostat (optional)
 - Fan kit with speed control
- AFUE rated
- Cabin kit
- Intellifire™ ignition system
- High thermal efficiency
- Scaled combustion chamber, top or rear vent
- Multiple optional decorative fronts, interchangeable decorative panels and Firescreen companions
- 16,000-40,000 Btu/Hour Input (NC)
- Optional Heat Zone® or Heat Duct kit
- Optional remote control

6000TR-Oak and 6000TV-Oak Features

- Intellifire ignition system
- Five ceramic logs
- High thermal efficiency
- Heater rated (6000TR-Oak)
- Variable valve
- Scaled combustion chamber, top or rear vent (6000TR-Oak)
- B-vent off the top (6000TV-Oak)
- Multiple optional decorative fronts, interchangeable decorative panels and Firescreen companions
- 18,000-27,000 Btu/Hour Input (NC) (6000TV-Oak)
- 18,500-30,000 Btu/Hour Input (NC) (6000TR-Oak)
- Optional weathered brick refractory kit
- Optional Heat Zone® or Heat Duct kit (6000TR-Oak)
- Optional remote control and wall switches

Series 6000CF-Oak Specifications

MODEL	HEIGHT		FRONT WIDTH		BACK WIDTH		DEPTH		GLASS SIZE	BTU INPUT
	Actual	Framing	Actual	Framing	Actual	Framing	Actual	Framing		
6000CF-Oak	38	44-3/4	41-1/8	42	28-1/2	42	21-1/2	22	36 x 24-3/4	20,000-30,000 Btu/hour



Dimensions above are in inches. Reference dimensions only. We recommend measuring individual units at installation. Assumes the use of 1/2" Sheetrock. NOTE: Non-combustible material is allowed over this dimension. Make sure you do NOT cover the decorative door opening. Refer to installation manual for detailed specifications on installing this product. Heat & Glo reserves the right to update units periodically. The flame and ember appearance may vary based on the type of fuel burned and the venting configuration used. Pictures in this brochure are not a true representation of the fireplace and/or flames.

6000CF-Oak Features

- Clean face design
- Intellifire™ ignition system
- Five ceramic logs
- High thermal efficiency
- Heater rated
- Variable valve
- Sealed combustion chamber, top vent
- Firescreen front with optional Firescreen companions
- 20,000-30,000 Btu/Hour Input (NG)
- 18,500-30,000 Btu/Hour Input (LP)
- Optional weathered brick refractory kit
- Optional Heat Zone® or Heat Duct kit
- Optional remote controls and wall switches

Heat Zone

Optional Heat Zone climate control system turns your fireplace into a flexible, energy-saving heat source by transferring excess heat from your fireplace to other locations in your home.

Heat Duct

Optional Heat Duct system improves furnace efficiency and room comfort by pulling excess heat away from the fireplace, out of the hearth room and into your furnace's cold air return ducting.

Healthy Hearth

Our direct vent fireplaces will not alter the quality of indoor room air in any way. The sealed combustion chamber draws in fresh air from outdoors and discards all combustion by-products back outside.

Limited Lifetime Warranty*

The strongest in the industry. Heat & Glo guarantees protection for all gas units, including a lifetime warranty of the most important aspects: fiber logs, stainless steel burner, firebox and heat exchanger.

Intellifire

Our exclusive, state-of-the-art Intellifire ignition system reduces gas consumption and thermogenerator wear by providing a pilot flame only when needed. Also supplies a back-up battery system to run the fireplace during a power outage.

*For full warranty details, go to www.heatandglo.com



FEATURES	6000TRXI	6000CF-OAK	6000TR-OAK	6000TV-OAK
Max Btu/Hour Input (NG)	40,000	30,000	30,000	27,000
Intensity package	*			
Mystfire® Burner	*	*	*	*
Flame-Out-Of-Log technology	*			
Base refractory	*	*	*	*
Refractory kit	*	optional	optional	optional
Climate control damper	*			
On/off switch for Flame-Out-Of-Logs	*			
Customer control panel	*			
Adjustable valve	*	*	*	*
Wall thermostat	*	optional	optional	optional
Fan kit with speed control	*	optional	optional	optional
Heat Zone® option	*	*	*	*
Heat Duct option	*	*	*	*
AFUE rated	*			
Heater rated	*	*	*	*
Cabin kit	*	optional	optional	*
Gas flex connector	*	*	*	*
On/off rocker switch	*	**	*	*
Intellifire® technology available	*	*	*	*
Remote controls and wall switches for convenience	optional	optional**	optional	optional
Ceramic glass	*			
Tempered glass		*	*	*

* WSK-21-W wall switch kit ships with Firescreen front

For complete
information
and valuable
assistance on this
model, please
contact us at:

HEAT & GLO

Heat & Glo
20802 Kensington Boulevard, Lakeville, MN 55044
(888) 427-3973 (952) 985-6000

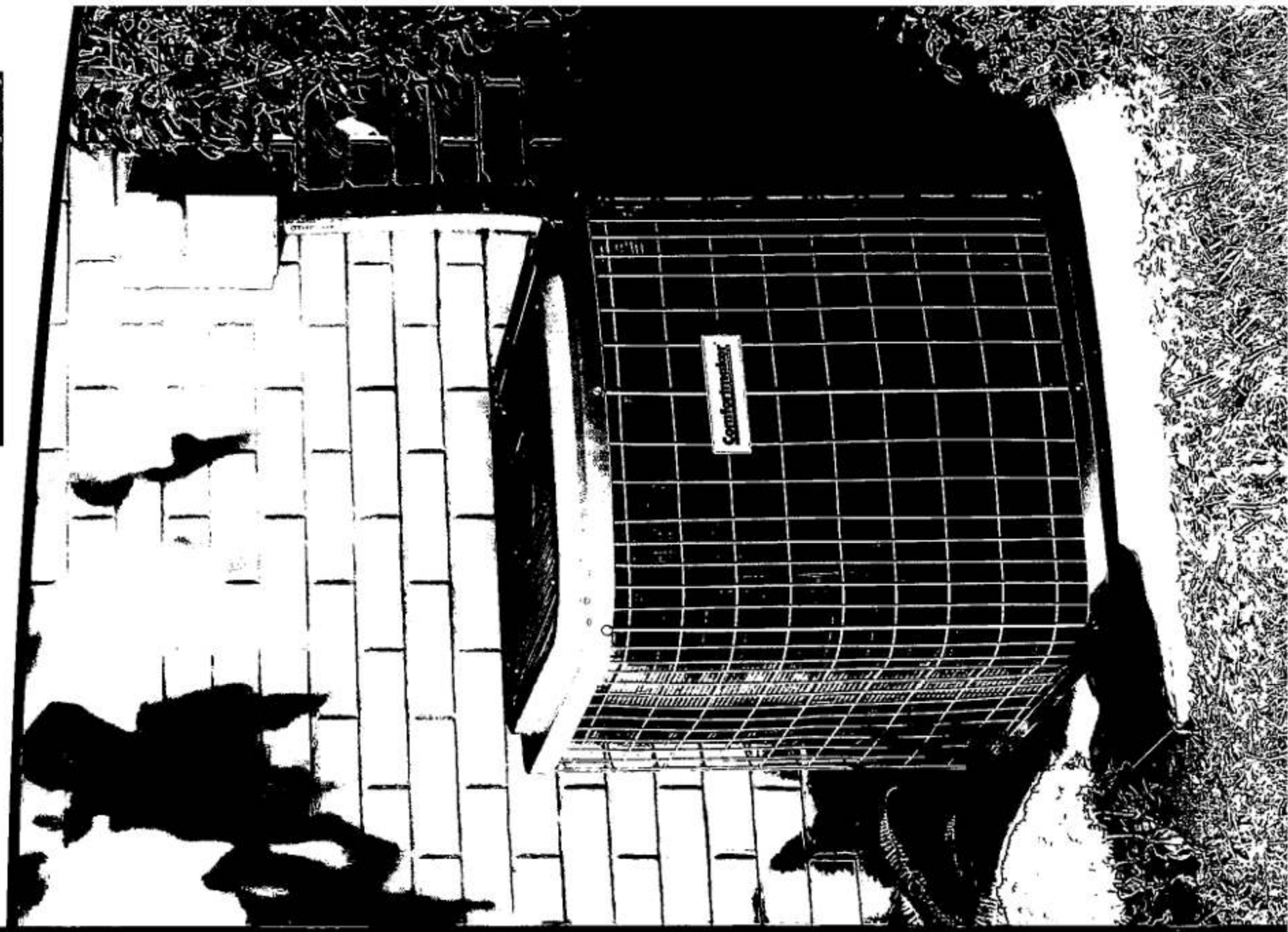
Email: info@heatnglo.com
Web: heatnglo.com

A brand of Hearth & Home Technologies, Inc.

B-6000-US 3/05

SOFTSOUND™ 1200+ SERIES
AIR CONDITIONER

Comfortmaker®
Air Conditioning & Heating



Premium performance pays off in personal comfort.

Premium energy savings.

With a long tradition of quality to uphold and a commitment to innovation, the Comfortmaker® SoftSound™ 1200+ Series Air Conditioner offers homeowners the perfect combination of durability and technology. It's made to run quietly, it's made to last, and most importantly, it's made to be exceptionally energy efficient. Credit for this energy efficiency goes to the scroll compressor, regarded as the best in the industry. No wonder the SoftSound 12 SEER Series exceeds federal energy standards. SEER stands for Seasonal Energy Efficiency Ratio. Think of it like miles per gallon on a car. If your present unit is over ten years old, the Comfortmaker SoftSound 1200+ could cut your cooling costs by up to 50%*!

Premium peace and quiet.



Quiet operation comes from superior components, starting with the scroll compressor. Its unique design features no pistons and fewer moving parts. That results in quieter, more efficient performance as well as longer life. Enclosing the fan motor works to reduce noise and keep out dirt and moisture. Comfortmaker engineers used a top-discharge design to help minimize airflow noise as the discharged air is moved up and away from your home. Solid construction and quality components also contribute to the quiet performance of the SoftSound 1200+.

Standard Features That Set New Standards

1. 12 SEER EXCEEDS FEDERAL EFFICIENCY STANDARDS FOR SAVINGS ON HEATING AND COOLING BILLS.

2. SCROLL COMPRESSOR, THE INDUSTRY'S BEST FOR HIGH EFFICIENCY, DEPENDABILITY, DURABILITY.

3. COPPER TUBING AND ALUMINUM FIN STOCK COILS FOR STRENGTH AND EFFICIENCY.

4. STURDY GALVANIZED STEEL CABINET TRIPLE-STEP PAINTED TO STAND UP TO WEATHER AND TIME.

5. OFFSET WIRE GRILLS TO PROTECT COILS AGAINST DAMAGE AND LOSS OF EFFICIENCY.

6. TOP-DISCHARGE DESIGN REDUCES NOISE, IMPROVES AIRFLOW.

7. ENCLOSED FAN MOTOR REDUCES NOISE, KEEPS OUT DIRT AND MOISTURE.

8. COMPACT DESIGN REQUIRES ONLY 6-INCH INSTALLATION CLEARANCE. NEUTRAL COLOR FOR A ATTRACTIVE LOOK.



The scroll compressor is the leading professional choice for efficient, reliable, and durable performance. Few moving parts and no pistons also reduce operating noise and reduce wear for longer life.



The special fan motor enclosure not only reduces noise, it helps keep out debris and moisture.

The top-discharge design improves airflow and adds to the quiet and performance.

Comfort.

Premium endurance.

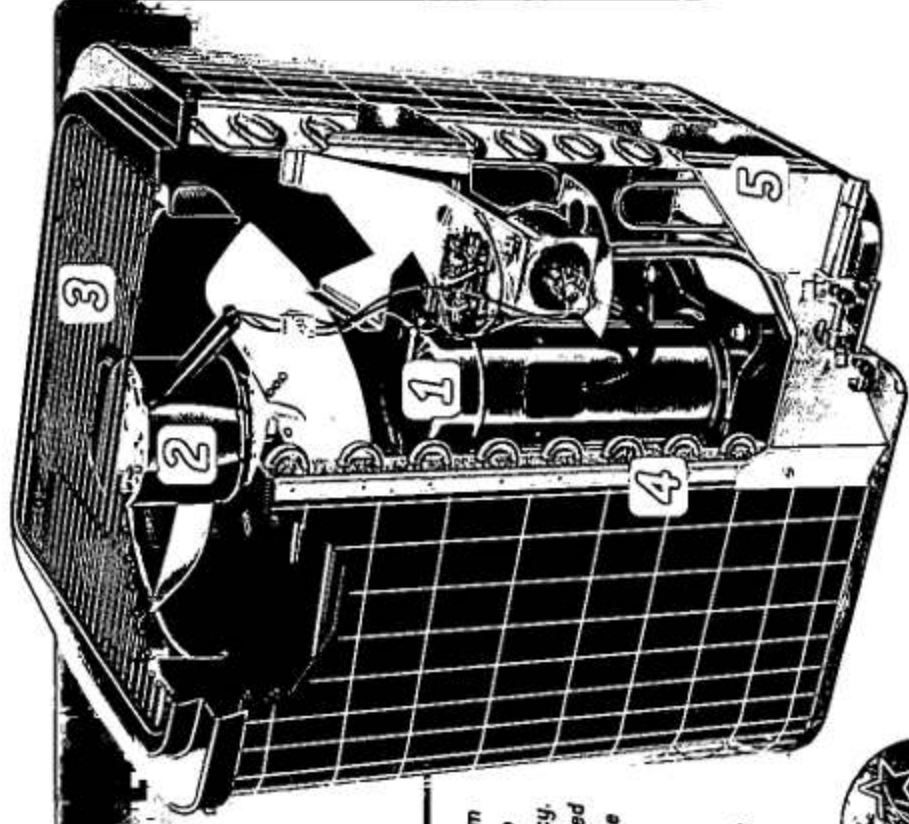


The construction of the Comfortmaker SoftSound 1200+ is geared to maintaining quiet, efficient performance through years of temperature extremes. The coil, made of sturdy copper tubing and aluminum fin stock, is guarded from damage that could cause efficiency loss by an offset, specially coated wire grille. The galvanized steel cabinet goes through a triple-step paint process to make it tough enough to take all kinds of weather. The neutral gray color and compact style help the unit blend into your landscape. New design changes allow your dealer to position it closer to the house for a neater installation.

Premium warranty support.



The quality of a Comfortmaker SoftSound 1200+ Series Air Conditioner is backed by quality warranties. Every model, from 1 1/4- to 5-ton capacity, is covered with a 10 year compressor limited warranty* and a 5 year parts limited warranty.* That's one of the best warranties in the business! Your dealer will recommend the right capacity model for the needs of your home. You should also ask for details about HELP® (Homeowner's Extended Labor Program) for continuing warranty coverage. The Comfortmaker SoftSound 1200+ will let you enjoy years of cool comfort with peace and quiet, lower cooling bills, and the complete security of excellent warranty coverage.



Copper tubing and prepainted aluminum fin stock add strength and durability to the coil as well as maximizing efficiency. All coils are 100% leak tested. The coated offset grille guards against coil damage which can lead to loss of efficiency.



A triple-step paint process on the galvanized steel cabinet helps prevent corrosion and protects the finish from weather.

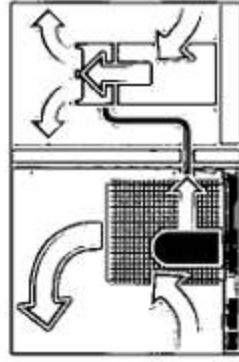


Ask for Heating & Cooling Equipment with the Energy Star Label—the Symbol for Energy Efficiency.

* See published warranty for complete details.

Years of comfort, seasons of savings.

Achieve optimum performance.

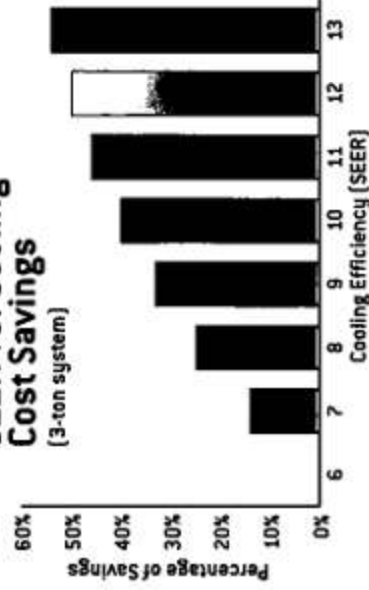


A central air conditioning system consists of a condensing unit and an evaporator coil. The condensing unit

compresses and cools refrigerant gas before sending it to the evaporator coil. A blower passes air over the supercooled coil, cooling the air. This cool air is then circulated through ducts in your home. A "split system" air conditioning setup places the condensing unit outside your home and the evaporator coil inside. Both components must be properly sized and matched to achieve optimum performance.

HOW MUCH CAN I SAVE?

SEER vs. Cooling Cost Savings (3-ton system)



Air conditioning efficiency is measured by Seasonal Energy Efficiency Ratio or SEER value. Higher ratings give you increased savings. Installing the Comfortmaker SoftSound 1200+ Series Air Conditioner with the proper matching Comfortmaker indoor coil also ensures maximum efficiency.

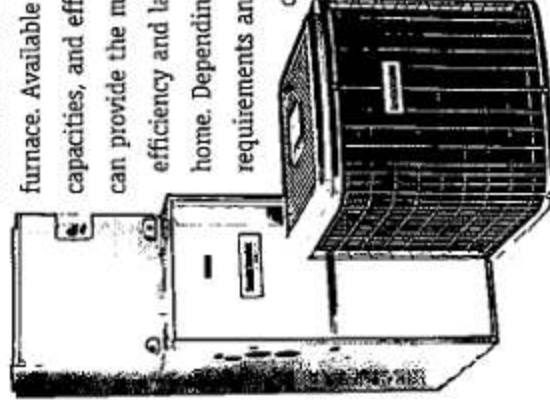
As part of its commitment to quality, International Comfort Products reserves the right to change specifications on its products without notice. Illustrations and photographs in this brochure are only representative. Some product models may vary. Comfortmaker products use the industry's standard refrigerant method which has been EPA-approved until the year 2020. This industry is actively testing new refrigerants to find an eco-friendly replacement that matches the cost, proven reliability, and efficiency of the current technology.

CAC2 Series
© 2002 International Comfort Products
A member of the United Technologies Corporation family. Stock symbol UTX.

Working smart and saving money.

Consider the benefits of pairing your Comfortmaker air conditioner with a Comfortmaker furnace. Available in a variety of sizes, capacities, and efficiencies, these units can provide the maximum value in

efficiency and lasting comfort for your home. Depending on your home's requirements and your area's weather conditions, your dealer can design the system that best handles the heating and cooling of your home.



MODEL SPECIFICATIONS

MODEL	DIMENSIONS H x W x D (INCHES)
CAC218AK	26 1/8 x 24 3/4 x 26 1/2
CAC224AK	26 1/8 x 24 3/4 x 26 1/2
CAC230AK	26 1/8 x 24 3/4 x 26 1/2
CAC236AK	34 3/8 x 29 3/4 x 32 3/4
CAC242AK	38 1/8 x 29 3/4 x 32 3/4
CAC248AK	36 1/8 x 33 x 35
CAC260AK	38 1/8 x 33 x 35

COMFORT WITH CONFIDENCE

Comfortmaker
Air Conditioning & Heating

P.O. Box 128
Lewistown, TN 37091
www.comfortmaker.com

All systems tested and listed by the appropriate testing agencies.



Part No. 421-42-3301-00
Printed 06/02

SOFTSOUND™ DLX 90 GAS FURNACE

Comfortmaker®
Air Conditioning & Heating



Peace and quiet—with premium comfort.

Keep out the noise and the cold...

When you upgrade to the DLX 90, you'll understand why this gas furnace deserves the SoftSound™ name. The reason for the quiet is the combination of craftsmanship and quality Comfortmaker® builds into the system. The thermal-lined and insulated cabinet, with solid doors, retains heat and reduces operating sounds. And the installer can even tailor the timed blower, using the adjustable off delay, for maximum comfort.

...Season after season.



If you want a furnace that will last for years, this is the one. Components are designed for efficiency, durability, and safety. The heat exchangers are made of tough stainless steel for years of trouble-free operation.

The direct vent option uses clean outdoor air for combustion, thereby minimizing chemicals that can corrode a heat exchanger. The hot surface-to-pilot ignition provides a superior control system for consistent starts. Safety is handled by a single-stage gas valve operation, special sensors, and limit controls. A self-diagnostic system also makes a furnace checkup quick and easy for your technician.

Standard Features That Set New Standards

• 92% AFUE EFFICIENCY RATING REDUCES HEATING COSTS.

• THERMAL-LINED AND INSULATED CABINET WITH SOLID DOORS RETAINS HEAT AND REDUCES SOUND.

• STAINLESS STEEL RP-J III HEAT EXCHANGER WITH WELD-FREE CLAMSHELL DESIGN AND STAINLESS STEEL SECONDARY HEAT EXCHANGER COMBINE DURABILITY WITH HIGH HEAT TRANSFER.

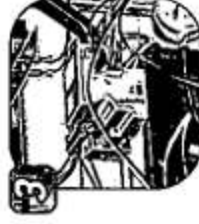
• DIRECT VENT OPTION USES CLEAN OUTDOOR AIR FOR COMBUSTION, THEREBY MINIMIZING CHEMICALS THAT CAN CORRODE A HEAT EXCHANGER.



RP-J III heat exchanger features patented¹¹ interlocking clamshell construction, using proven nonweld technology for increased reliability and performance. The integrated ripple-edged design forces more heat to the outside surface areas for higher efficiencies. Because it's made of stainless steel, it provides years of reliable operation.



Stainless steel secondary heat exchanger boosts efficiency and provides superior strength and resistance to corrosion.



Hot surface-to-pilot ignition. Provides reliable starts and efficient operation.

¹¹ Patent pending

Deluxe 80 Single Stage Flexibility

- 40" high for more noise reduction and ease of installation.
- Factory shipped for natural gas, with LP Gas conversion kits available.
- Four position - upflow/downflow/horizontal installation.
- Category I venting.
- Three position inducer capability.
- Common venting with water heater.

Service

- Self diagnostics.
- Entire blower assembly mounted on rails.

Quality

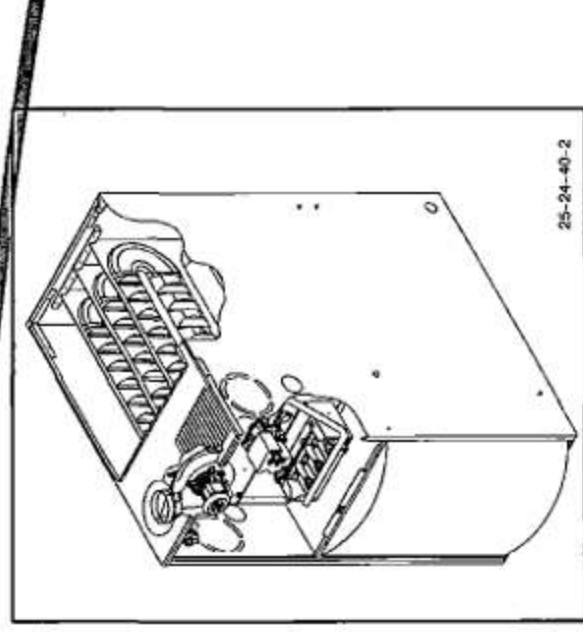
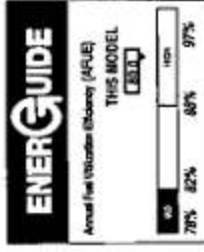
- RPJ III Aluminized steel heat exchanger.
- 20 year limited warranty on heat exchangers and 5 years on parts.
- High temperature limit control prevents overheating.
- Hot surface pilot ignition device.
- Flame roll-out sensors standard.
- Louvered doors.
- One piece prepainted steel cabinet.
- Masonry chimney adapter available.

Comfort

- Adjustable timed blower Off delay.
- Humidifier terminal
- Electronic air cleaner terminal.

Efficiency

- 80% AFUE efficiency range. +
- Single stage gas valve operation.
- Single stage fan timer.
- Multispeed, prelubricated PSC motors.
- Induced draft blower.
- In-shot burners.



Representative drawing only, some models may vary in appearance.

WARNING

This furnace is not designed for use inside mobile homes, trailers, or recreational vehicles. Such use could result in property damage, bodily injury, and/or death.

UPFLOW/DOWNFLOW/HORIZONTAL (NATURAL GAS)

Model Number	Heat Exchangers #	Dimensions H x W x D (in.)	Price
C8MPN050B12A	20 year	40 x 15 ¹ / ₂ x 29	
C8MPN075B12A	20 year	40 x 15 ¹ / ₂ x 29	
C8MPN075F16A	20 year	40 x 19 ¹ / ₈ x 29	
C8MPN100F14A	20 year	40 x 19 ¹ / ₈ x 29	
C8MPN100F20A	20 year	40 x 19 ¹ / ₈ x 29	
C8MPN100J20A	20 year	40 x 22 ³ / ₄ x 29	
C8MPN125J20A	20 year	40 x 22 ³ / ₄ x 29	
C8MPN150J20A	20 year	40 x 22 ³ / ₄ x 29	

20 YEAR LIFETIME WARRANTY

PERFORMANCE DATA HEATING

Model Number	Input (MBTUH)	Efficiency AFUE +	Cooling Cap. @ .5" W.C.
*8MPN050B12A	50,000	80%	1.5 - 3.0 TON
*8MPN075B12A	75,000	80%	1.5 - 3.0 TON
*8MPN075F16A	75,000	80%	2.5 - 4.0 TON
*8MPN100F14A	100,000	80%	2.0 - 3.5 TON
*8MPN100F20A	100,000	80%	3.5 - 5.0 TON
*8MPN100J20A	100,000	80%	3.5 - 5.0 TON
*8MPN125J20A	125,000	80%	3.5 - 5.0 TON
*8MPN150J20A	150,000	80%	3.5 - 5.0 TON

* Denotes Brand

FURNACE SPECIFICATIONS MULTI-POSITION

Model Number	NATURAL GAS	*8MPN							
		050B12	075B12	075F16	100F14	100F20	100J20	125J20	150J20
INPUT (btuh)		50,000	75,000	75,000	100,000	100,000	100,000	125,000	150,000
		40,000	60,000	60,000	81,000	81,000	81,000	101,000	121,000
HTG. CAP. (btuh)		80%	80%	80%	80%	80%	80%	80%	80%
AFUE % (ICS)		35-65	30-60	30-60	35-65	35-65	35-65	35-65	35-65
TEMP. RISE (deg. F)		115/160	115/160	115/160	115/160	115/160	115/160	115/160	115/160
VOLTS/PH/Hz		9.8	8.9	10.0	9.0	12.0	12.0	12.0	12.0
FLA		40	40	40	40	40	40	40	40
TRANSFORMER (V.A.)		1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2
GAS PIPE SIZE (IN.)		4"	4"	4"	4"	4"	4"	4"	4"
VENT COLLAR SIZE		3.0	3.0	4.0	3.5	5.0	5.0	5.0	5.0
COOLING CAP.		128	134	140		156	166	172	188
SHIPPING WEIGHT (LBS.)		40	40	40	40	40	40	40	40
DIMENSIONS (in.) HEIGHT		15 1/2 x 29	15 1/2 x 29	19 1/8 x 29	19 1/8 x 29	19 1/8 x 29	22 3/4 x 29	22 3/4 x 29	22 3/4 x 29
WIDTH X DEPTH		15 1/2 x 29	15 1/2 x 29	19 1/8 x 29	19 1/8 x 29	19 1/8 x 29	22 3/4 x 29	22 3/4 x 29	22 3/4 x 29

(ICS) = Isolated Combustion System

BLOWER PERFORMANCE MULTI-POSITION

Model Number	BLOWER TYPE AND SIZE	*8MPN							
		050B12	075B12	075F16	100F14	100F20	100J20	125J20	150J20
MOTOR H.P. (TYPE)		1 1/2PSC	1 1/2PSC	1 1/2PSC	1 1/2PSC	1 1/2PSC	3/4PSC	1/2PSC	3/4PSC
		4	4	4	4	4	4	4	4
MOTOR SPEEDS		4	4	4	4	4	4	4	4

AIRFLOW DATA

.10 ESP IN. W.C.	LOW	454	665	803	742	1845	1845	839	1590
	MEDIUM LOW	672	925	1091	916	2058	2058	1211	1827
	MEDIUM HIGH	1116	1171	1548	1287	2285	2285	1584	2073
	HIGH	1335	1501	2194	1723	2508	2508	2267	2283
.30 ESP IN. W.C.	LOW	351	616	760	625	1790	1790	829	1519
	MEDIUM LOW	609	893	1082	845	1982	1982	1188	1708
	MEDIUM HIGH	1055	1136	1557	1195	2189	2189	1559	1993
	HIGH	1237	1407	2070	1638	2379	2379	2151	2262
.50 ESP IN. W.C.	LOW	278	563	699	525	1714	1714	798	1440
	MEDIUM LOW	550	840	1028	747	1903	1903	1111	1623
	MEDIUM HIGH	991	1074	1500	1079	2066	2066	1553	1904
	HIGH	1160	1307	1913	1515	2232	2232	2049	2150
.70 ESP IN. W.C.	LOW	201	517	618	440	1592	1592	734	1331
	MEDIUM LOW	498	741	934	682	1769	1769	1079	1525
	MEDIUM HIGH	897	977	1369	1006	1914	1914	1505	1774
	HIGH	1029	1200	1708	1371	2049	2049	1912	1991
.90 ESP IN. W.C.	LOW	---	442	502	348	1404	1404	651	1163
	MEDIUM LOW	422	650	772	553	1571	1571	1015	1381
	MEDIUM HIGH	783	866	1138	868	1711	1711	1400	1579
	HIGH	903	1050	1447	1185	1839	1839	1704	1813
1.00 ESP IN. W.C.	LOW	---	394	423	297	1291	1291	595	1079
	MEDIUM LOW	353	593	661	490	1444	1444	897	1277
	MEDIUM HIGH	718	804	984	787	1541	1541	1308	1494
	HIGH	822	963	1254	1066	1694	1694	1585	1694

NOTE: Applications of *8MPN125 above 1650 CFM requires two side returns or use accessory stand-off filter kit for single return. To achieve 2000 CFM with the stand-off filter kit you will still need a bottom return or 2 side filters.

* Denotes Brand

MODEL NUMBER IDENTIFICATION GUIDE

★		8	MP	N	0 75	B	1 2	A	#
Brand		Engineering Rev. Denotes minor changes							
Brand Efficiency									
8 = Non-Condensing, 80+% Gas Furnace		Marketing Digit Denotes minor change							
9 = Condensing, 90+% Gas Furnace									
Installation Configuration		Cooling Airflow 08 = 800 CFM 12 = 1200 CFM 14 = 1400 CFM							
UP = Upflow UH = Upflow/Horizontal DH = Downflow/Horizontal MP = Multiposition, Upflow/Downflow/Horizontal									
Major Design Feature		Cabinet Width B = 15.5" Wide F = 19.1" Wide J = 22.8" Wide L = 24.5" Wide Input (Nominal MBTUH)							
1 = One (Single) Pipe 2 = Two Pipe D = 1 or 2 Pipe L = Low NOx									
N = Single Stage P = PVC Vent T = Two Stage V = Variable Speed									

* Denotes Brand

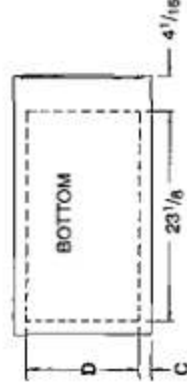
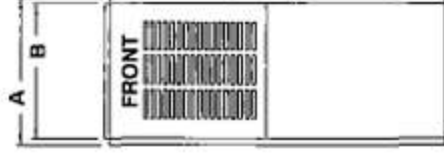
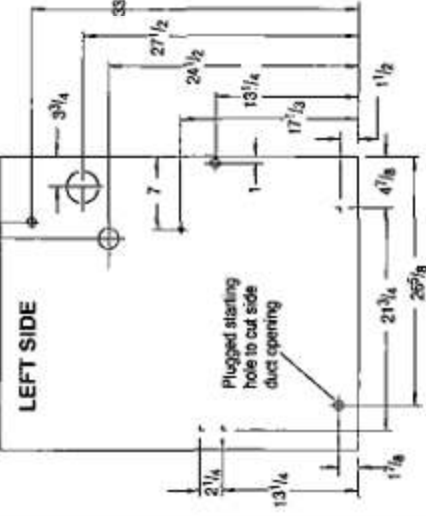
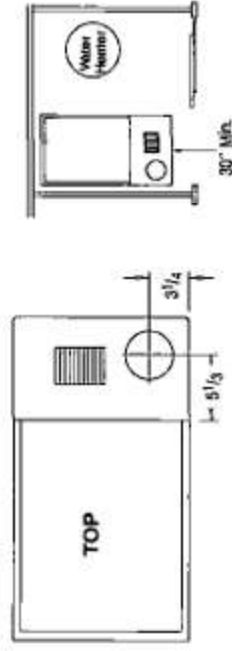
ACCESSORIES

Model Number	Description	Used With Models
TWINNING KIT		
NAHA003WK	Twinning kit. Allows operation of two identical-size model furnaces.	ALL *8MPN FURNACES
GAS CONVERSION KITS		
NAHL002LP 1160991 *	Natural gas to LP (propane) conversion kit. Allows field conversion to LP (propane) gas.	ALL *8MPN FURNACES
NAHF002NG 1009510 *	LP (Propane) to natural gas conversion kit. Allows field conversion to natural gas. (Single Stage)	ALL *8MPN FURNACES
FILTER KITS		
NAHA001FF	External filter frame. 16" x 25"	Side Return (All Furnaces) Bottom Return (All "F" 19 1/8" Furnaces under 1650 CFM)
NAHA002FF	Bottom return filter frame kit 20" x 25"	(All "J" 22 3/4" Furnaces)
NAHA003FF	Bottom or side return filter frame kit 14" x 25"	(All "B" 15 1/2" Furnaces)
NAHA001TK	Duct Standoff Filter Kit. To adapt 20" x 25" filter for single side return.	Side Return (All single return applications with 1650 CFM or greater) Bottom Return (All "F" 19 1/8" Furnaces under 1650 CFM)
COMBUSTIBLE FLOOR SUBBASES		
NAHH001SB	Subbase Furnace ONLY: All 15 1/2" wide furnace models	*8MPN075-100F
NAHH002SB	Subbase Furnace ONLY: All 19 1/4" wide furnace models	*8MPN100-125J
NAHH003SB	Subbase Furnace ONLY: All 22 3/4" wide furnace models	Counterflow furnace *8MPN050-075B Counterflow furnace *8MPN075-100F Counterflow furnace *8MPN100-125J
NAHH004SB	Subbase Furnace w/15 1/2" cased coil	
NAHH005SB	Subbase Furnace w/19 1/4" cased coil	
NAHH006SB	Subbase Furnace w/22 3/4" cased coil	
MASONRY CHIMNEY ADAPTER		
NAHA001DH	Chimney adapter (6")	*8MPN050, 075, 100
NAHA002DH	Chimney adapter (7")	*8MPN125 & 150
VENT GUARD		
NAHA002VC	Downflow vent guard	All downflow applications
COIL ADAPTER		
NAHA001CA	Coil Adapter for Downflow Furnaces	All Multi-Position Furnaces in the Downflow Application

Fast part number

** Applications of *8MPN125 above 1650 CFM requires two side returns or NAHA001TK 20 x 25 duct stand-off filter kit or bottom return applications with the *8MPN125 & 150 use the 20 x 25 bottom return filter kit, NAHA002FF. To achieve 2000 CFM with the stand-off filter kit you will still need a bottom return or 2 side filters.

UNIT DIMENSIONS



Drawing is representative some models may vary

DIMENSIONAL INFORMATION

Unit Capacity	Cabinet		Top		Bottom			Duct Size
	A	B	F	G	C	D	H	
*8MPN050B12	15 1/2	14	6		13 3/8	12 5/8	H	
*8MPN075F16	19 1/8	17 5/8	7 3/4		2 1/8	14 3/4	J	
*8MPN100F20	22 3/4	21 1/4	9 1/2		1 5/16	16 3/4	J	
*8MPN100J20								
*8MPN125J20								
*8MPN150J20								

NOTE: Evaporator "A" coil drain pan dimensions may vary from furnace duct opening size. Always consult evaporator specifications for duct size requirements.

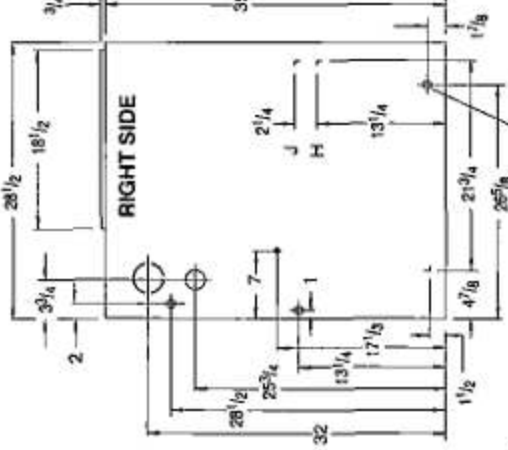
Unit is designed for bottom return or side return. Return air through back of unit is NOT allowed.

ALL DIMENSIONS IN INCHES (millimeters)

MINIMUM CLEARANCES TO COMBUSTIBLE MATERIALS FOR ALL UNITS

REAR	0
FRONT	3"
Recommended For Service	30"
ALL SIDES OF SUPPLY PLENUM	1"
SIDES	0
VENT	
Single Wall Vent	6"
Type B-1 Double Wall Vent	1"
TOP OF FURNACE	1"

Horizontal position: Line contact is permissible only between lines formed by intersections of top and two sides of furnace jacket, and building joists, studs or framing.



Plugged starting hole to cut side duct opening

Deluxe 90 Single Stage

Flexibility

- Dual certified venting (1 or 2 pipes)
- Direct Vent furnace
- 40" high with wider cabinets, for noise reduction and ease of installation.
- Factory shipped as natural gas, with LP Gas conversion kits available.
- Four position - upflow/downflow/horizontal installation.
- Vent pipe can be run horizontally or vertically.
- Internal condensate drain system.

Service

- Self diagnostics.
- Entire blower assembly mounted on rails.

Quality

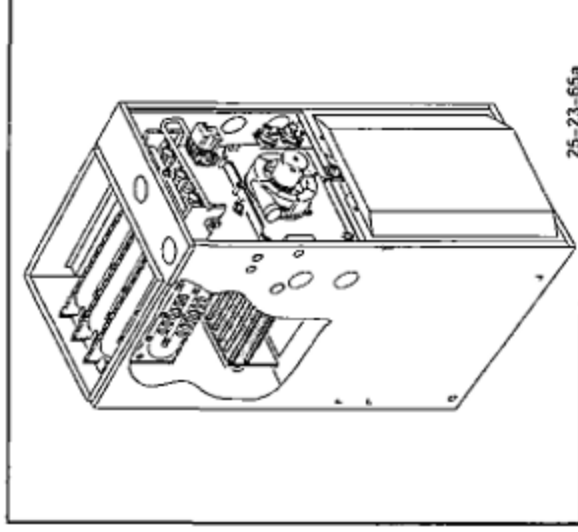
- RPJ III Stainless steel heat exchanger.
- Stainless steel secondary heat exchanger.
- Lifetime limited warranty on heat exchangers and 5 years on parts.
- High temperature limit control prevents overheating.
- Hot surface pilot ignition device.
- Flame roll-out sensors standard.
- Solid doors.

Comfort

- Adjustable timed blower Off delay.
- Thermal lined, one piece steel cabinet for noise reduction.
- Humidifier terminal
- Electronic air cleaner terminal.
- Insulated blower compartment.

Efficiency

- 92.1% AFUE efficiency range.
- Single stage gas valve operation.
- Single stage fan timer.
- Multispeed, prelubricated PSC blower motors.
- Induced draft blower.
- In-shot burners.
- California NOx approved.



Representative drawing only, some models may vary in appearance.

WARNING

This furnace is not designed for use inside mobile homes, trailers, or recreational vehicles. Such use could result in property damage, bodily injury, and/or death.

UPFLOW/DOWNFLOW/HORIZONTAL (NATURAL GAS)

Model Number	Heat Exchangers *	Dimensions H x W x D (in.)	Price
C9MPD050F12B	Lifetime	40 x 19 ¹ / ₈ x 29	
C9MPD075F12B	Lifetime	40 x 19 ¹ / ₈ x 29	
C9MPD080J16B	Lifetime	40 x 22 ³ / ₄ x 29	
C9MPD100J14B	Lifetime	40 x 22 ³ / ₄ x 29	
C9MPD100J20B	Lifetime	40 x 24 ¹ / ₂ x 29	
C9MPD125L20B	Lifetime	40 x 24 ¹ / ₂ x 29	

* LIMITED LIFETIME WARRANTY

PERFORMANCE DATA HEATING

Model Number	Input (MBTUH)	Efficiency AFUE	Cooling Cap. @ .5 In. W.C.
*9MPD050F12B	50	92.1	1.5 - 3.0 TON
*9MPD075F12B	75	92.1	1.5 - 3.0 TON
*9MPD080J16B	80	92.1	2.5 - 4.0 TON
*9MPD100J14B	100	92.1	2 - 3.5 TON
*9MPD100J20B	100	92.1	3.5 - 5.0 TON
*9MPD125L20B	125	92.1	3.5 - 5.0 TON



FURNACE SPECIFICATIONS

Model Number	NATURAL GAS	*9MPD050F12	*9MPD075F12	*9MPD080J16	*9MPD100J14	*9MPD100J20	*9MPD125L20
INPUT (btuh)		50,000	75,000	80,000	100,000	100,000	125,000
HTG. CAP. (btuh)		45,500	67,500	72,000	90,000	90,000	113,125
AFUE % (ICS)		92.1	92.1	92.1	92.1	92.1	92.1
ALTERNATE INPUT BTUH		40,000	60,000	NA	80,000	80,000	100,000
ALTERNATE OUTPUT BTUH		35,400	54,000	NA	72,000	72,000	90,500
CSE %		84.9	85.1	85.5	85.5	85.5	85.2
NOx (Ng/J)		<40	<40	<40	<40	<40	<40
TEMP. RISE (deg. F)		35-65	40-70	35-65	40-70	40-70	40-70
VOLTS/PH/Hz		115/60/1	115/60/1	115/60/1	115/60/1	115/60/1	115/60/1
MIN./MAX. VOLTAGE		97/132	97/132	97/132	97/132	97/132	97/132
F.L.A.		9.8	8.9	9.0	9.0	10.5	11.2
TRANSFORMER (V.A.)		40	40	40	40	40	40
GAS PIPE SIZE (IN.)		1/2	1/2	1/2	1/2	1/2	1/2
VENT SIZE*		2" or 3" OD	2" or 3" OD	2" or 3" OD	3" OD	3" OD	3" OD
COOLING CAP.		3.0	3.0	4.0	3.5	5.0	5.0
HIGH ALTITUDE PRESSURE SWITCH		1013803	1013803	1013813	1013803	1013803	1013157
FILTER SIZE (IN.) (1 required)		16X25X1	16X25X1	16X25X1	16X25X1	16X25X1(2)	16X25X1(2)
DIMENSIONS (in.) HEIGHT		40	40	40	40	40	40
WIDTH X DEPTH		19 1/8 x 29	19 1/8 x 29	22 3/4 x 29	22 3/4 x 29	22 3/4 x 29	24 1/2 x 29
WEIGHT (Lbs.)		150	153	172	172	180	193

* Vent size may vary depending on length, number of elbows, standard vent or direct vent. See Installation Instructions.

BLOWER PERFORMANCE

Model Number	NATURAL GAS	*9MPD050F12	*9MPD075F12	*9MPD080J16	*9MPD100J14	*9MPD100J20	*9MPD125L20
BLOWER TYPE AND SIZE		11-8	11-10	11-10	11-10	11-10	11-10
MOTOR H.P. (TYPE)		1/2 PSC	1/2 PSC	1/2 PSC	1/2 PSC	3/4 PSC	3/4 PSC
MOTOR SPEEDS		4	4	4	4	4	4

AIRFLOW DATA

.10 ESP IN. W.C.	LOW	826	706	823	700	1682	1720
	MEDIUM LOW	1083	917	1109	912	1870	1910
	MEDIUM HIGH	1301	1163	1527	1209	2081	2127
	HIGH	1408	1358	1850	1550	2263	2315
.20 ESP IN. W.C.	LOW	804	677	795	660	1654	1696
	MEDIUM LOW	1050	875	1087	884	1826	1881
	MEDIUM HIGH	1242	1120	1482	1171	2031	2087
	HIGH	1347	1319	1791	1492	2193	2268
.30 ESP IN. W.C.	LOW	770	636	747	616	1597	1644
	MEDIUM LOW	1028	840	1056	843	1775	1833
	MEDIUM HIGH	1195	1076	1426	1139	1963	2024
	HIGH	1295	1283	1720	1434	2165	2201
.40 ESP IN. W.C.	LOW	735	595	677	575	1547	1600
	MEDIUM LOW	985	812	1016	790	1719	1777
	MEDIUM HIGH	1153	1031	1382	1088	1899	1961
	HIGH	1237	1202	1648	1378	2056	2131
.50 ESP IN. W.C.	LOW	698	546	617	528	1498	1533
	MEDIUM LOW	952	766	970	735	1653	1720
	MEDIUM HIGH	1093	987	1317	1040	1825	1891
	HIGH	1183	1148	1575	1317	1978	2029
.60 ESP IN. W.C.	LOW	657	490	544	472	1428	1494
	MEDIUM LOW	909	702	854	677	1583	1647
	MEDIUM HIGH	1040	889	1245	979	1737	1804
	HIGH	1118	1077	1485	1247	1854	1948
.70 ESP IN. W.C.	LOW	633	477	531	459	1355	1413
	MEDIUM LOW	863	630	763	608	1503	1571
	MEDIUM HIGH	935	821	1154	909	1650	1708
	HIGH	1053	989	1401	1161	1757	1820

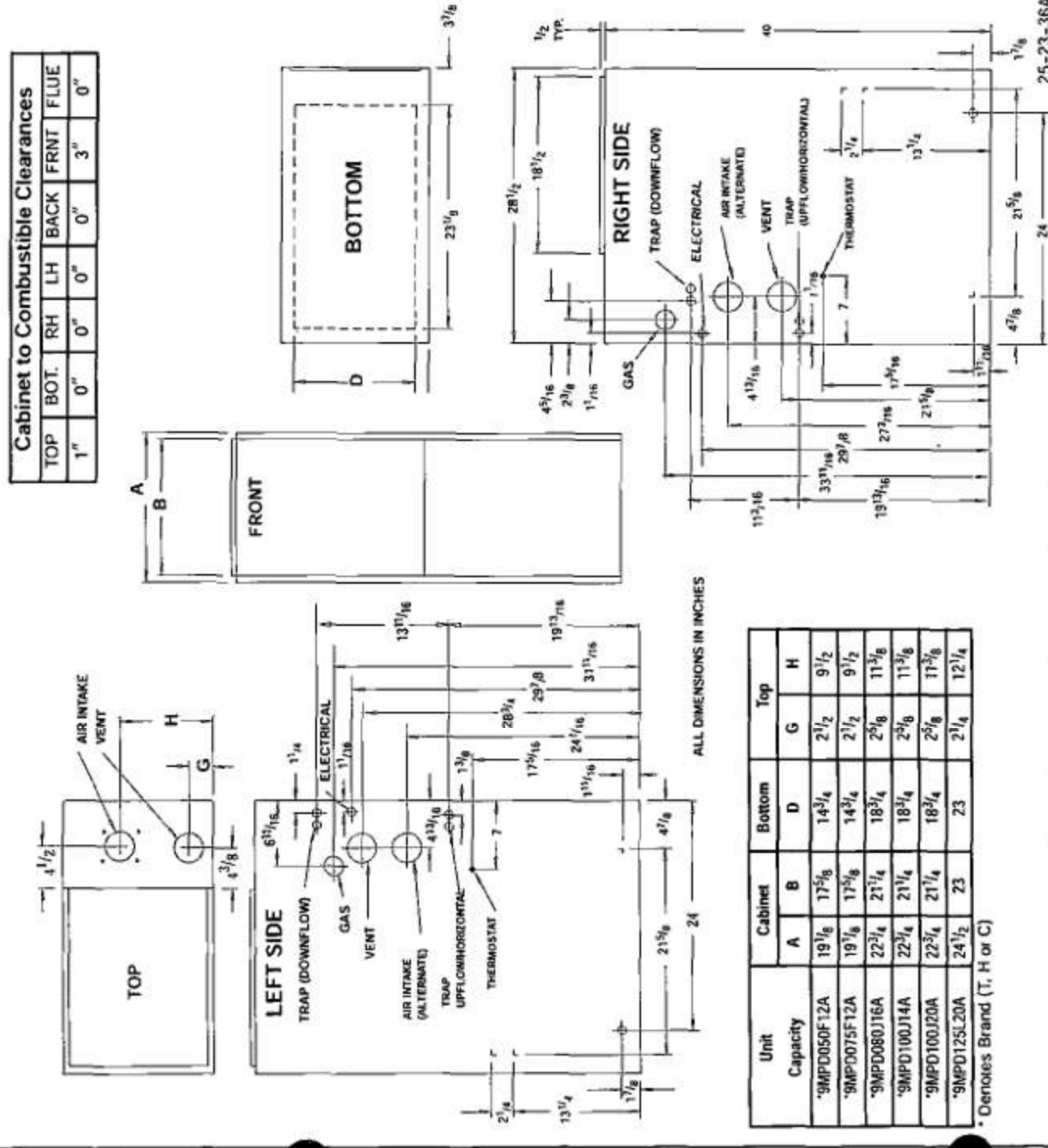
* Denotes Brand (T, H or C)

SPECIFICATIONS SUBJECT TO CHANGE WITHOUT NOTICE

MODEL NUMBER IDENTIFICATION GUIDE

Brand Identifier		9		M P		D		0 7 5		F		1 2		A		#	
Model Efficiency		* = Brand Specific															
Model Efficiency		8 = Non-Condensing, 80+% Gas Furnace															
Model Efficiency		9 = Condensing, 90+% Gas Furnace															
Installation Configuration		UP = Upflow DN = Downflow UH = Upflow/Horizontal															
Installation Configuration		HZ = Horizontal DH = Downflow/Horizontal															
MP = Multiposition, Up/Down/Horizontal																	
Major Design Feature		N = Single Stage															
Major Design Feature		1 = One (Single) Pipe															
Major Design Feature		2 = Two Pipe															
Major Design Feature		D = 1 or 2 Pipe															
Major Design Feature		L = Low NOx															
Major Design Feature		V = Variable Speed															
Cooling Airflow		08 = 800 CFM															
Cooling Airflow		12 = 1200 CFM															
Cooling Airflow		14 = 1400 CFM															
Cooling Airflow		16 = 1600 CFM															
Cooling Airflow		20 = 2000 CFM															
Cabinet Width		B = 15.5" Wide															
Cabinet Width		J = 22.8" Wide															
Cabinet Width		F = 19.1" Wide															
Cabinet Width		L = 24.5" Wide															
Input (Nominal MBTUH)																	

DIMENSIONS



SPECIFICATIONS SUBJECT TO CHANGE WITHOUT NOTICE

ACCESSORIES

Model Number	Description	Used With Models
NAHA003WK	Twinning Kit - Allows operation of two identical -size model furnaces.	All *9MPD Furnaces
NAHF002LP	Gas Conversion Kits - Natural gas to LP (propane) conversion kit. Allows field conversion to LP (propane) gas.	*9MPD
1009509 ^		
NAHF002NG	Gas Conversion Kits - LP (Propane) to natural gas conversion kit. Allows field conversion to natural gas.	*9MPD
1009510 ^		
NAHF003NG	Gas Conversion Kits - LP (Propane) to natural gas conversion kit. Allows field conversion to natural gas.	*9MD2080
1013816 ^		
NAHF003LP	Gas Conversion Kits - Natural gas to LP (Propane) conversion kit. Allows field conversion to LP (Propane) gas. Includes LP Pressure Switch.	*9MPD080
1013815 ^		
NAHK001LF	Alternate Input Kit (Nat Gas). Derates input by 20%	All *9MPD Models
1009910 ^		
NAHK002LF	Alternate Input Kit (LP Gas). Derates input by 20%	All *9MPD Models
1009911 ^		
NAHA001PS	LP Low Pressure Switch - For detecting low line pressure. Opens at 6.5" W.C. (included in NAHF002LP)	All LP *9MPD Models
1009522 ^		
NAHA001FF	Filter Kits - External filter frame. 16" x 25"	Side Return (All Furnaces) Bottom Return (All "F" 19 1/8" Furnaces under 1650 CFM)
NAHA001FP	External filter frame. 16" x 25" (Bulk Pack Kit - Qty 10)	(All "J" 22 1/4" Furnaces)
NAHA002FF	Filter Kits - Bottom return filter frame kit 20" x 25"	(All "B" 15 1/2" Furnaces)
NAHA002FP	Bottom return filter frame kit 20" x 25" (Bulk Pack Kit - Qty 10)	
NAHA003FF	Filter Kits - Bottom or side return filter frame kit 14" x 25"	
NAHA003FP	Bottom or side return filter frame kit 14" x 25" (Bulk Pack Kit - Qty 10)	
NAHA001TK	Duct Standoff Filter Kit. To adapt 20" x 25" filter for single side return.	Side Return (All single return applications with 1650 CFM or greater) Bottom Return (All "F" 19 1/8" Furnaces under 1650 CFM)
NAHA001NK	Condensate neutralizer kit - for condensing gas furnaces	All *9MPD Furnaces If Required
612833 ^		
NAHH002SB	Combustible Floor Subbase - Furnace ONLY: All 19 1/4" wide furnace models	*9MPD050/075/080
NAHH003SB	Combustible Floor Subbase - Furnace ONLY: All 22 3/4" wide furnace models	*9MPD100
NAHH010SB	Combustible Floor Subbase - Furnace ONLY: All 24 1/2" wide furnace models	*9MPD125
NAHH005SB	Subbase - Furnace w/19 1/4" cased coil	*9MPD050/075/080 Counterflow furnace w/19 1/4" cased coil
NAHH006SB	Subbase - Furnace w/22 3/4" cased coil	*9MPD100 Counterflow furnace w/22 3/4" cased coil
NAHH009SB	Subbase - Furnace w/24 1/2" cased coil	*9MPD125
NAHA001CV	3" Concentric vent kit - allows single wall penetration for 2 pipe direct vent applications (90+).	*9MPD100/125 *9MPD080 (35' & (4) 90° elbows)
1011129 ^		
NAHA002CV	2" Concentric vent kit allows - single wall penetration for 2 pipe direct vent applications (90+).	*9MPD050/075 *9MPD080 (65' & (4) 90° elbows)
NAHA001CA	Coil Adapter for Downflow Furnaces	All Downflow Models
1013802 ^	Standard Pressure Switch Kit (1 Pressure Switch)	*9MPD050, 075 & 100J
1013812 ^	Standard Pressure Switch Kit (1 Pressure Switch)	*9MPD080
1013166 ^	Standard Pressure Switch Kit (2 Pressure Switches)	*9MPD125
1013803 ^	High Altitude Pressure Switch Kit (1 Pressure Switch)	*9MPD050, 075 & 100
1013813 ^	High Altitude Pressure Switch Kit (1 Pressure Switch)	*9MPD080
1013157 ^	High Altitude Pressure Switch Kit (2 Pressure Switches)	*9MPD125
NAHA001LV	Long Vent Kit	*9MPD075
NAHA002LV	Long Vent Kit	*9MPD100
NAHA003LV	Hing Altitude Long Vent Kit	*9MPD075/100

^ Must be ordered from Service Parts

* Denotes Brand (T, H or C)

Warm up to the energy savings.



This furnace even softens the shock of monthly heating bills. The 92% AFUE[†] rating is your assurance that the SoftSound DLX 90 doesn't waste fuel—or your money—like that old, inefficient system. High efficiency starts with the RPJ™ III heat exchanger. It's made of stainless steel, engineered for maximum heat transfer and corrosion resistance. The weld-free construction means there are no welds to crack under the strain of heating and cooling. The stainless steel secondary heat exchanger captures heat that's wasted in less efficient gas furnaces.

[†] AFUE stands for Annual Fuel Utilization Efficiency.

HOT SURFACE TO PILOT IGNITION, QUIET INDUCED DRAFT BLOWER ASSEMBLY AND IN-SHOT BURNERS ASSURE RELIABLE STARTS AND EFFICIENT OPERATION.



Multispeed PSC circulation blower runs quietly and efficiently.



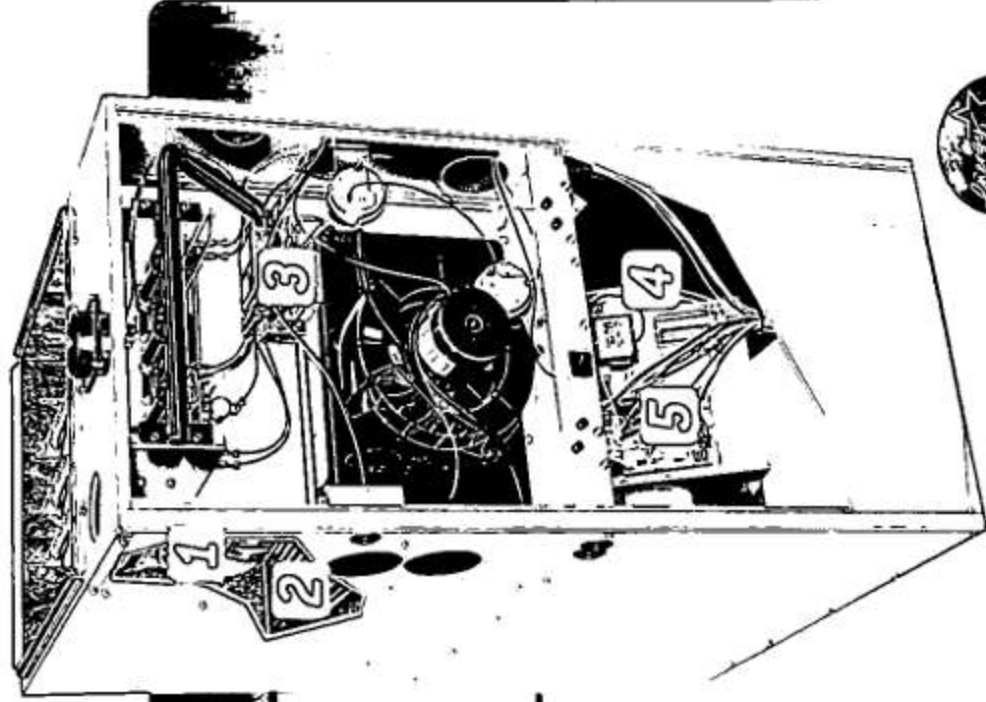
State-of-the-art electronic control board monitors operation and provides diagnostics.

Get the backing of solid warranties.



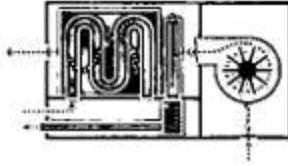
Comfortmaker warranties make a strong statement about the quality of the brand. The SoftSound DLX 90 Gas Furnace comes with an impressive lifetime limited warranty* on the primary and secondary heat exchangers and a 5 year limited warranty* on all other parts. Ask your Comfortmaker dealer about the added advantage of extended coverage, available at a reasonable cost through HELP* (Homeowner's Extended Labor Program).

* See published warranty for complete details.



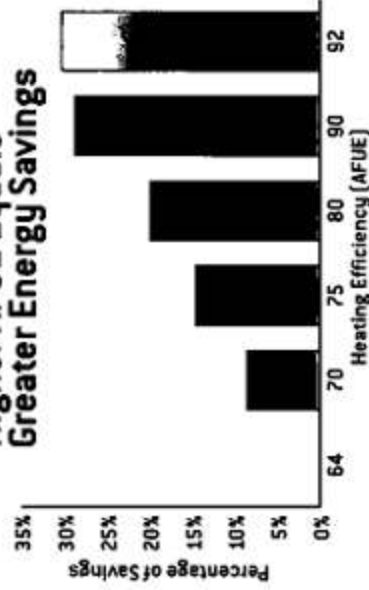
Years of comfort, seasons of savings.

Furnace basics.



The thermostat calls for heat and the gas valve is energized by the control system. The burners ignite and the induced draft blower assembly draws the flame into and through the sealed primary heat exchanger. Then, the hot flue gases are pulled from the primary heat exchanger into the secondary heat exchanger, increasing efficiency. The circulation blower moves another stream of air over the outside of both heat exchangers and brings the warm air into your home. Combustion products are safely vented outside. In the direct vent mode, clean, outdoor air is used for combustion.

Higher AFUE Equals Greater Energy Savings

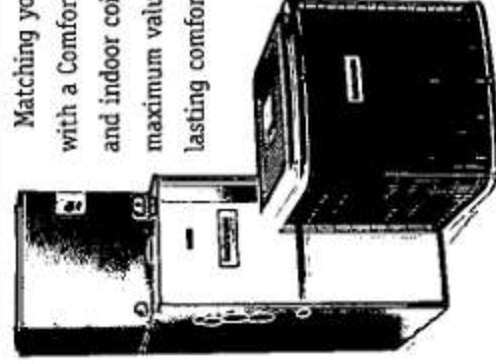


Percentage based on national averages, may vary according to efficiency of current unit and installation.

As part of its commitment to quality, International Comfort Products reserves the right to change specifications on its products without notice. Illustrations and photographs in this brochure are only representative. Some product models may vary.

CRMPD Series
© 2002 International Comfort Products
A member of the United Technologies Corporation family. Stock symbol UTX.

Enjoy the benefits of a new Comfortmaker system.



Matching your Comfortmaker furnace with a Comfortmaker air conditioner and indoor coil can provide the maximum value in efficiency and lasting comfort. Your dealer can design a system that fits your home's requirements and your weather zone from the variety of sizes, capacities, and efficiencies available.

MODEL SPECIFICATIONS

MODEL NUMBER	DIMENSIONS (HxWxD)	BTUH INPUT
C9MPD050F12A	40 x 19 1/4 x 29	50,000
C9MPD075F12A	40 x 19 1/4 x 29	75,000
C9MPD080J16A	40 x 22 1/4 x 29	80,000
C9MPD100J14A	40 x 22 1/4 x 29	100,000
C9MPD100J20A	40 x 22 1/4 x 29	100,000
C9MPD125L20A	40 x 24 1/2 x 29	125,000

Installation Flexibility

Dual certification: two-pipe, direct vent or single-pipe operation.
Compact 40" multiposition furnace: upflow, horizontal left and right, or downflow.

COMFORT WITH CONFIDENCE

Comfortmaker
Air Conditioning & Heating

P.O. Box 128
Lewisburg, TN 37091
www.comfortmaker.com

All systems tested and listed by the appropriate testing agencies.



PERMIT #

06-2013

LOT: 15

BLOCK: 958.21

FRAMING CHECKLIST

Instructions: Builder or Builder's representative checks boxes marked 'B'. Building Inspector checks boxes marked 'I'. Responsible Person in Charge of Work signs, initials and dates in spaces provided. Building Inspector initials and dates in spaces provided.

NOTE: ALL ITEMS SHOULD BE AS SHOWN ON THE PLANS OR AS REQUIRED BY CODE.

A. BASEMENT OR CRAWL SPACE

1. ANCHORAGE:

BOLTS

☒ ☒ SPACING

☒ ☒ SIZE

STRAPS

☒ ☒ SPACING (PER MANUFACTURER'S SPECS)

☒ ☒ SIZE

2. SILL PLATES:

2x6 ☒ ☒ SIZE

ACQ ☒ ☒ GRADE, SPECIES

ACQ ☒ ☒ TREATMENT

Form 1/2" ☒ ☒ LAPS

NA ☒ ☒ SILL SEALER

W/A ☒ ☒ PROPER TREATMENT OVER FOUNDATION OPENINGS (BEARING OF JOIST)

W/A ☒ ☒ TERMITE PROTECTION

3. BEAM POCKETS:

☒ ☒ BEARING/SHIMS

☒ ☒ TERMITE PROTECTION OR CLEARANCE

4. COLUMNS:

☒ ☒ SIZED PER PLAN

☒ ☒ ATTACHMENT/PLATES

☒ ☒ SPACING/LOCATION

☒ ☒ PAINT/COATING

B. FLOOR FRAMING AND FLOORING

1. BOX OR RIM JOIST, OR PERIMETER BAND JOIST:

Exist 2x8
D-Floor
Double
3x8

3RD FLOOR
☒ ☒ SIZE
☒ ☒ GRADE, SPECIES
☒ ☒ SINGLE OR DOUBLE
☒ ☒ PRE-ENGINEERED PER MANUFACTURER'S SPECS
☒ ☒ CANTILEVERS AS PER DESIGN

2. GIRDERS AND BEAMS:

As Plan ☒ ☒ SIZED PER PLAN
Engineer ☒ ☒ TYPE
As Plan ☒ ☒ GRADE, SPECIES
As Plan ☒ ☒ LOCATION AND RELATION TO THE PLAN
100 ☒ ☒ NAILING
Full ☒ ☒ ATTACHMENT SCHEDULE
☒ ☒ BEARING
☒ ☒ LAPPING

3. FLOOR JOIST:

Exist 2x8
DF

3RD FLOOR
☒ ☒ SIZED PER PLAN
☒ ☒ GRADE, SPECIES
☒ ☒ PRE-ENGINEERED COMPONENTS AS SPECIFIED
☒ ☒ BEARING
☒ ☒ NAILING
☒ ☒ BRIDGING
☒ ☒ CUTTING AND NOTCHING (AS PER CODE)
☒ ☒ POINT LOADS - SUPPORTED AS PER PLAN
☒ ☒ SPAN HANGERS
☒ ☒ HEADERS
☒ ☒ FRAMED OPENINGS

4. FLOORING, SHEATHING, OR DECKING:

Exist 1st
8

1ST 2ND 3RD FLOOR
☒ ☒ MATERIAL
☒ ☒ PANEL SPAN, THICKNESS

5. STAIR ATTACHMENT:

1ST 2ND 3RD FLOOR
☒ ☒ BEARING
☒ ☒ NAILING

SPECIAL REQUIREMENTS

☒ ☒ ☒ EDGE BLOCKING (IF REQUIRED)
☒ ☒ ☒ GAPPING
☒ ☒ ☒ LAYOUT

I hereby certify that I inspected this building using this checklist and it conforms to the released plans and to the requirements of the Uniform Construction Code, N.J.A.C. 5:23.

Responsible Person in Charge of Work: GR

Date: 11/21/06

Building Inspector Initials: [Signature]

Date: 11/21/06

C. WALL FRAMING

1. EXTERIOR WALL FRAME:

3rd FLOOR	☒	1st	☒
2nd	☒	2nd	☒
SIZE	☒	SIZE	☒
SPACE	☒	SPACE	☒
SPECIES AND GRADE	☒	SPECIES AND GRADE	☒
CUTTING, NOTCHING, AND BORING	☒	CUTTING, NOTCHING, AND BORING	☒
HEADER SIZES,	☒	HEADER SIZES,	☒
JACK STUD BEARING	☒	JACK STUD BEARING	☒
TOP PLATES	☒	TOP PLATES	☒
NAILING	☒	NAILING	☒
LAPS	☒	LAPS	☒
RAFTER TIES	☒	RAFTER TIES	☒
HURRICANE STRAPS	☒	HURRICANE STRAPS	☒

D. ROOF FRAMING

1. TRUSS ROOF FRAMING (AS PER DESIGN):

2	☒	2	☒
1	☒	1	☒
LAYOUT PLANS	☒	LAYOUT PLANS	☒
TRUSS MEMBERS	☒	TRUSS MEMBERS	☒
CONNECTION SCHEDULE	☒	CONNECTION SCHEDULE	☒
PERMANENT BRACING DETAILS	☒	PERMANENT BRACING DETAILS	☒
DORMERS/ROOF STRUCTURES ON MANUFACTURER'S DRAWINGS	☒	DORMERS/ROOF STRUCTURES ON MANUFACTURER'S DRAWINGS	☒
EQUIPMENT/APPLIANCES ON MANUFACTURER'S DRAWINGS	☒	EQUIPMENT/APPLIANCES ON MANUFACTURER'S DRAWINGS	☒
LOCATION AS PER LAYOUT	☒	LOCATION AS PER LAYOUT	☒
ALIGNMENT	☒	ALIGNMENT	☒
BEARING	☒	BEARING	☒
SPACING	☒	SPACING	☒
CONNECTIONS TO BEARING POINTS	☒	CONNECTIONS TO BEARING POINTS	☒
NO CONNECTION TO NON-BEARING POINTS	☒	NO CONNECTION TO NON-BEARING POINTS	☒
DAMAGE AND DEFECTS	☒	DAMAGE AND DEFECTS	☒
ENGINEERED METHOD OF REPAIR	☒	ENGINEERED METHOD OF REPAIR	☒

1. SHEATHING - EXTERIOR WALLS:

1/2	☒	1/2	☒
MATERIAL	☒	MATERIAL	☒
PANEL SPAN, THICKNESS	☒	PANEL SPAN, THICKNESS	☒
SPECIAL REQUIREMENTS	☒	SPECIAL REQUIREMENTS	☒
GAPING	☒	GAPING	☒
LAYOUT	☒	LAYOUT	☒
CORNER BRACING (IF REQUIRED)	☒	CORNER BRACING (IF REQUIRED)	☒

E. SHEATHING

2. SHEATHING - ROOF:

1/2	☒	1/2	☒
MATERIAL	☒	MATERIAL	☒
PANEL SPAN, THICKNESS	☒	PANEL SPAN, THICKNESS	☒
SPECIAL REQUIREMENTS	☒	SPECIAL REQUIREMENTS	☒
BLOCKING, EDGE (IF REQUIRED)	☒	BLOCKING, EDGE (IF REQUIRED)	☒
GAPING	☒	GAPING	☒
LAYOUT	☒	LAYOUT	☒

2. INTERIOR LOAD-BEARING WALLS:

3rd FLOOR	☒	3rd FLOOR	☒
2nd	☒	2nd	☒
SIZE	☒	SIZE	☒
SPACE	☒	SPACE	☒
LAYOUT - SUPPORT BELOW	☒	LAYOUT - SUPPORT BELOW	☒
SPECIES AND GRADE	☒	SPECIES AND GRADE	☒
CUTTING, NOTCHING, AND BORING	☒	CUTTING, NOTCHING, AND BORING	☒
HEADER SIZES	☒	HEADER SIZES	☒
FIRE BLOCKING	☒	FIRE BLOCKING	☒
JACK STUD BEARING	☒	JACK STUD BEARING	☒
TOP PLATES	☒	TOP PLATES	☒
NAILING	☒	NAILING	☒
LAPS	☒	LAPS	☒
STRAPPING	☒	STRAPPING	☒

3. GABLE END BRACING (AS PER DESIGN):

1	☒	1	☒
LAYOUT	☒	LAYOUT	☒
SIZE	☒	SIZE	☒
TYPE	☒	TYPE	☒
NAILING	☒	NAILING	☒
OVERLAP	☒	OVERLAP	☒
TERMINATION	☒	TERMINATION	☒

(AS PER DESIGN):

3. INTERIOR NON-LOAD-BEARING WALLS:

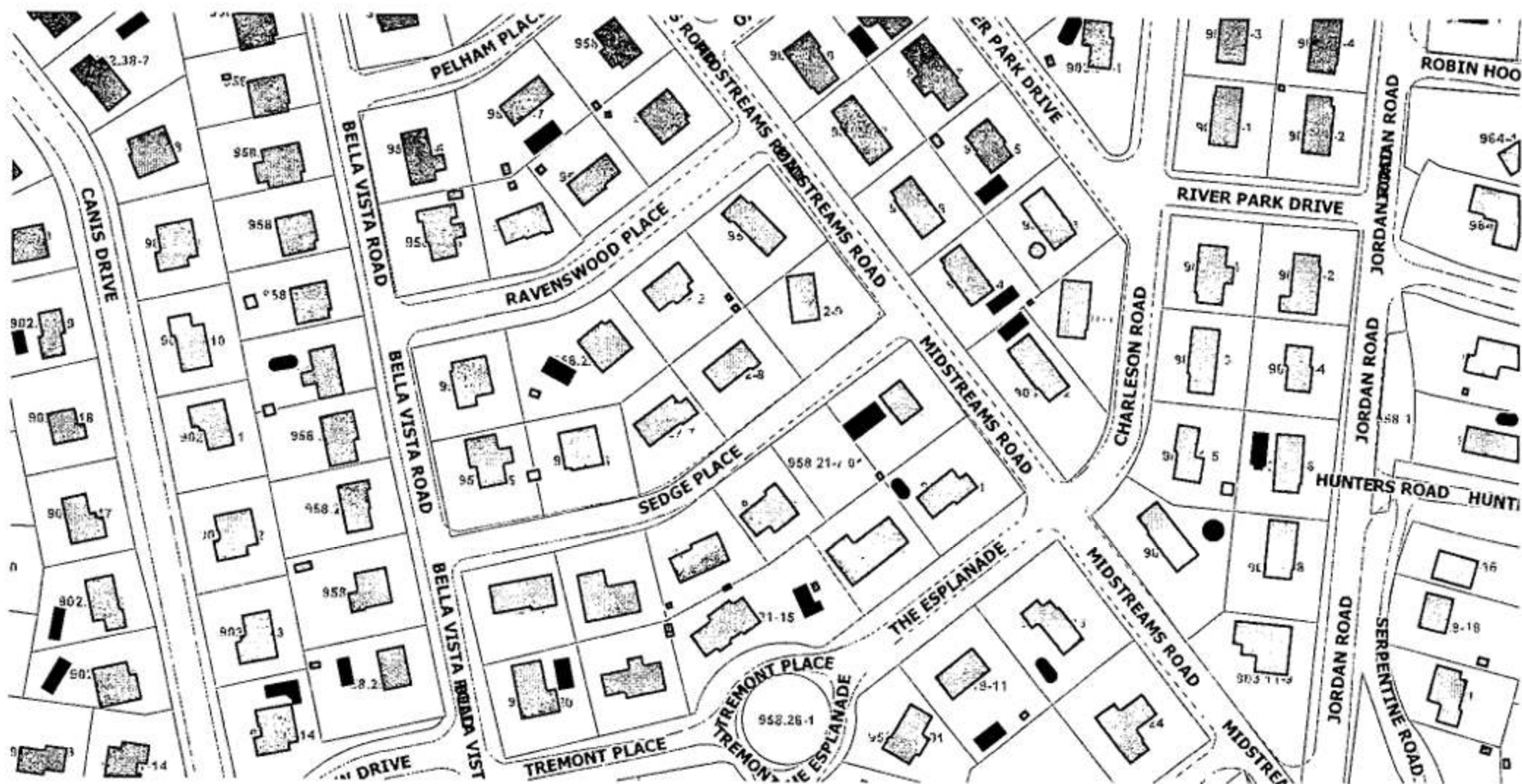
3rd FLOOR	☒	3rd FLOOR	☒
2nd	☒	2nd	☒
1st	☒	1st	☒
SIZE	☒	SIZE	☒
SPACE	☒	SPACE	☒
SPECIES AND GRADE	☒	SPECIES AND GRADE	☒
CUTTING, NOTCHING, AND BORING	☒	CUTTING, NOTCHING, AND BORING	☒
FIRE BLOCKING	☒	FIRE BLOCKING	☒
HEADER SIZES	☒	HEADER SIZES	☒
TOP PLATE NAILING	☒	TOP PLATE NAILING	☒

4. SOLID SAWN ROOF FRAMING:

2x10	☒	2x10	☒
SIZE	☒	SIZE	☒
GRADES, SPECIES	☒	GRADES, SPECIES	☒
LAYOUT	☒	LAYOUT	☒
SPACING	☒	SPACING	☒
SPAN	☒	SPAN	☒
BEARING	☒	BEARING	☒
FASTENING	☒	FASTENING	☒
DAMAGE CAUSED BY FASTENERS (RAFTERS NOT SPLIT BY TOENAILS)	☒	DAMAGE CAUSED BY FASTENERS (RAFTERS NOT SPLIT BY TOENAILS)	☒
CUTTING, NOTCHING, AND BORING	☒	CUTTING, NOTCHING, AND BORING	☒
BRIDGING	☒	BRIDGING	☒
RIDGE SIZE	☒	RIDGE SIZE	☒
HURRICANE TIES WHERE APPLICABLE	☒	HURRICANE TIES WHERE APPLICABLE	☒

1	☒	1	☒
FOUR FEET FROM FIREWALL	☒	FOUR FEET FROM FIREWALL	☒
NONCOMPOSITIVE FASTENERS	☒	NONCOMPOSITIVE FASTENERS	☒

SHEATHING, FRT - ROOF



Deluxe 80 Single Stage Flexibility

- 40" high for more noise reduction and ease of installation.
- Factory shipped for natural gas, with LP Gas conversion kits available.
- Four position - upflow/downflow/horizontal installation.
- Category I venting.
- Three position inducer capability.
- Common venting with water heater.

Service

- Self diagnostics.
- Entire blower assembly mounted on rails.

Quality

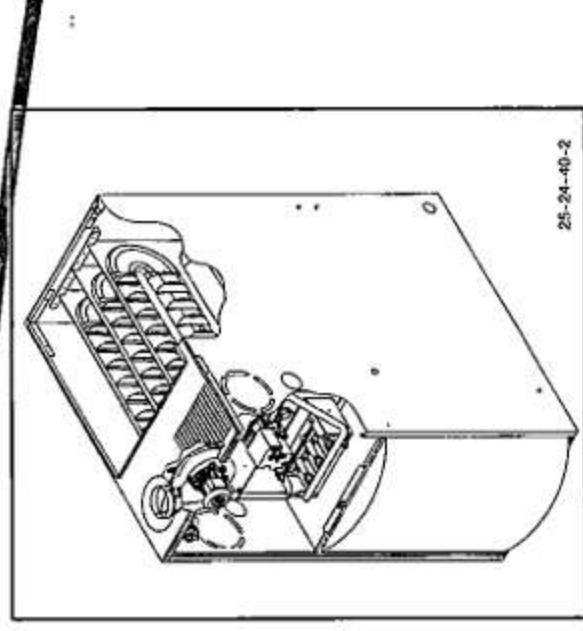
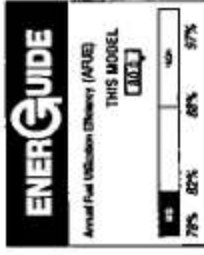
- RPJ III Aluminized steel heat exchanger.
- 20 year limited warranty on heat exchangers and 5 years on parts.
- High temperature limit control prevents overheating.
- Hot surface pilot ignition device.
- Flame roll-out sensors standard.
- Louvered doors.
- One piece prepainted steel cabinet.
- Masonry chimney adapter available.

Comfort

- Adjustable timed blower Off delay.
- Humidifier terminal
- Electronic air cleaner terminal.

Efficiency

- 80% AFUE efficiency range. +
- Single stage gas valve operation.
- Single stage fan timer.
- Multispeed, prelubricated PSC motors.
- Induced draft blower.
- In-shot burners.



Representative drawing only, some models may vary in appearance.

WARNING

This furnace is not designed for use inside mobile homes, trailers, or recreational vehicles. Such use could result in property damage, bodily injury, and/or death.

UPFLOW/DOWNFLOW/HORIZONTAL (NATURAL GAS)

Model Number	Heat Exchangers #	Dimensions H x W x D (In.)	Price
C8MPN050B12A	20 year	40 x 15 ¹ / ₂ x 29	
C8MPN075B12A	20 year	40 x 15 ¹ / ₂ x 29	
C8MPN075F16A	20 year	40 x 19 ¹ / ₈ x 29	
C8MPN100F14A	20 year	40 x 19 ¹ / ₈ x 29	
C8MPN100F20A	20 year	40 x 19 ¹ / ₈ x 29	
C8MPN100J20A	20 year	40 x 22 ³ / ₄ x 29	
C8MPN125J20A	20 year	40 x 22 ³ / ₄ x 29	
C8MPN150J20A	20 year	40 x 22 ³ / ₄ x 29	

20 YEAR LIFETIME WARRANTY

PERFORMANCE DATA HEATING

Model Number	Input (MBTUH)	Efficiency AFUE +	Cooling Cap. @ .5" W.C.
*8MPN050B12A	50,000	80%	1.5 - 3.0 TON
*8MPN075B12A	75,000	80%	1.5 - 3.0 TON
*8MPN075F16A	75,000	80%	2.5 - 4.0 TON
*8MPN100F14A	100,000	80%	2.0 - 3.5 TON
*8MPN100F20A	100,000	80%	3.5 - 5.0 TON
*8MPN100J20A	100,000	80%	3.5 - 5.0 TON
*8MPN125J20A	125,000	80%	3.5 - 5.0 TON
*8MPN150J20A	150,000	80%	3.5 - 5.0 TON

* Denotes Brand

RNACE SPECIFICATIONS MULTI-POSITION

Model Number	NATURAL GAS	*8MPN							
		050B12	075B12	075F16	100F14	100F20	100J20	125J20	150J20
BT (btuh)		50,000	75,000	75,000	100,000	100,000	100,000	125,000	150,000
CAP. (btuh)		40,000	60,000	60,000	81,000	81,000	81,000	101,000	121,000
E % (ICS)		80%	80%	80%	80%	80%	80%	80%	80%
P. RISE (deg. F)		35-65	30-60	30-60	35-65	35-65	35-65	35-65	35-65
TS/PHZ		115/1/60	115/1/60	115/1/60	115/1/60	115/1/60	115/1/60	115/1/60	115/1/60
		9.8	8.9	10.0	9.0	12.0	12.0	12.0	12.0
NSFORMER (V.A.)		40	40	40	40	40	40	40	40
PIPE SIZE (IN.)		1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2
COLLAR SIZE		4"	4"	4"	4"	4"	4"	4"	4"
FLING CAP.		3.0	3.0	4.0	3.5	5.0	5.0	5.0	5.0
SPRING WEIGHT (LBS.)		128	134	140	156	166	172	188	188
ENSIONS (IN.) HEIGHT		40	40	40	40	40	40	40	40
TH X DEPTH		15 1/2 x 29	15 1/2 x 29	19 1/8 x 29	19 1/8 x 29	19 1/8 x 29	22 3/4 x 29	22 3/4 x 29	22 3/4 x 29

= Isolated Combustion System

OWER PERFORMANCE MULTI-POSITION

Model Number	FLOW TYPE AND SIZE	*8MPN							
		050B12	075B12	075F16	100F14	100F20	100J20	125J20	150J20
MOTOR H.P. (TYPE)		1 1/2PSC	1 1/2PSC	1 1/2PSC	1 1/2PSC	1 1/2PSC	3/4PSC	1 1/2PSC	3/4PSC
MOTOR SPEEDS		4	4	4	4	4	4	4	4

RFLOW DATA

ESP IN. W.C.	LOW	454	665	803	742	1845	1845	839	1590
	MEDIUM LOW	672	925	1091	916	2058	2058	1211	1827
	MEDIUM HIGH	1116	1171	1548	1287	2285	2285	1584	2073
ESP IN. W.C.	HIGH	1335	1501	2194	1723	2508	2508	2267	2283
	LOW	351	616	760	625	1790	1790	829	1519
	MEDIUM LOW	609	893	1082	845	1992	1992	1188	1708
ESP IN. W.C.	MEDIUM HIGH	1055	1136	1557	1195	2189	2189	1559	1993
	HIGH	1237	1407	2070	1638	2379	2379	2151	2262
	LOW	278	563	699	525	1714	1714	798	1440
ESP IN. W.C.	MEDIUM LOW	550	840	1028	747	1903	1903	1111	1623
	MEDIUM HIGH	991	1074	1500	1079	2066	2066	1553	1904
	HIGH	1160	1307	1913	1515	2232	2232	2049	2150
ESP IN. W.C.	LOW	201	517	618	440	1592	1592	734	1331
	MEDIUM LOW	498	741	934	662	1769	1769	1079	1525
	MEDIUM HIGH	897	977	1369	1006	1914	1914	1505	1774
ESP IN. W.C.	HIGH	1029	1200	1708	1371	2049	2049	1912	1991
	LOW	---	442	502	348	1404	1404	651	1163
	MEDIUM LOW	422	650	772	553	1571	1571	1015	1381
ESP IN. W.C.	MEDIUM HIGH	783	866	1138	868	1711	1711	1400	1579
	HIGH	903	1050	1447	1185	1839	1839	1704	1813
	LOW	---	394	423	297	1291	1291	595	1079
ESP IN. W.C.	MEDIUM LOW	353	593	661	490	1444	1444	897	1277
	MEDIUM HIGH	718	804	984	787	1541	1541	1308	1494
	HIGH	822	963	1254	1066	1694	1694	1585	1694

E: Applications of *8MPN125 above 1650 CFM requires two side returns or use accessory stand-off filter kit for single return. Achieve 2000 CFM with the stand-off filter kit you will still need a bottom return or 2 side filters.

notes Brand

MODEL NUMBER IDENTIFICATION GUIDE

* 8		M P		N		0 7 5		B		1 2		A #	
Brand													
Brand Efficiency													
8 = Non-Condensing, 80+% Gas Furnace													
9 = Condensing, 90+% Gas Furnace													
Installation Configuration													
UP = Upflow		DN = Downflow											
UH = Upflow/Horizontal		HZ = Horizontal											
DH = Downflow/Horizontal													
MP = Multiposition, Upflow/Downflow/Horizontal													
Major Design Feature													
1 = One (Single) Pipe		N = Single Stage											
2 = Two Pipe		P = PVC Vent											
D = 1 or 2 Pipe		T = Two Stage											
L = Low NOx		V = Variable Speed											
* Denotes Brand													

Engineering Rev.
Denotes minor changes

Marketing Digit
Denotes minor change

Cooling Airflow
08 = 800 CFM
12 = 1200 CFM
14 = 1400 CFM

Cabinet Width
B = 15.5" Wide
F = 19.1" Wide
J = 22.8" Wide
L = 24.5" Wide

Input (Nominal MBTUH)

ACCESSORIES

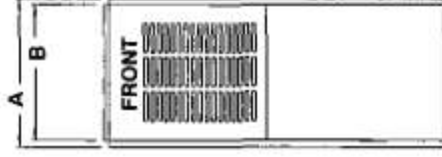
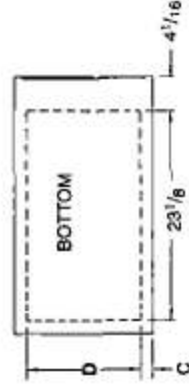
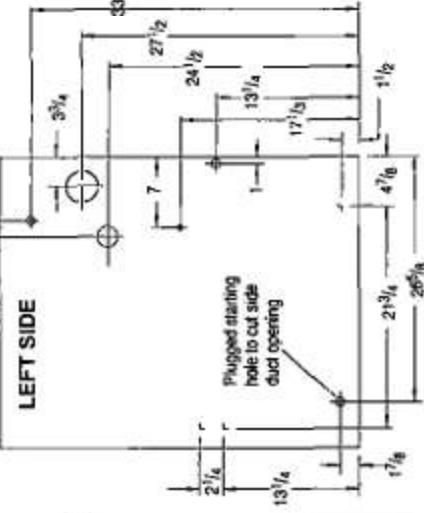
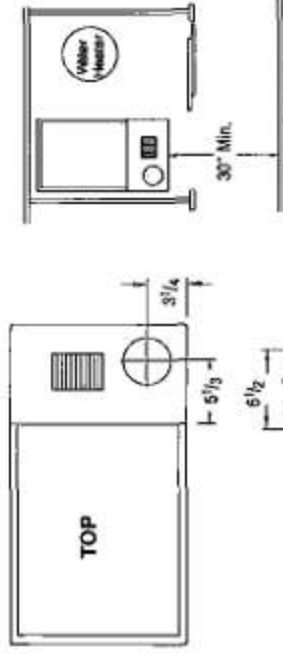
Model Number	Description	Used With Models
TWINNING KIT		
NAHA003WK	Twinning kit. Allows operation of two identical-size model furnaces.	ALL *8MPN FURNACES
GAS CONVERSION KITS		
NAHL002LP 1160991 *	Natural gas to LP (propane) conversion kit. Allows field conversion to LP (propane) gas.	ALL *8MPN FURNACES
NAHF002NG 1009510 *	LP (Propane) to natural gas conversion kit. Allows field conversion to natural gas. (Single Stage)	ALL *8MPN FURNACES
FILTER KITS		
NAHA001FF	External filter frame. 16" x 25"	Side Return (All Furnaces) Bottom Return (All "F" 19 1/8" Furnaces under 1650 CFM)
NAHA002FF	Bottom return filter frame kit 20" x 25"	(All "J" 22 3/4" Furnaces)
NAHA003FF	Bottom or side return filter frame kit 14" x 25"	(All "B" 15 1/2" Furnaces)
NAHA001TK	Duct Standoff Filter Kit. To adapt 20" x 25" filter for single side return.	Side Return (All single return applications with 1650 CFM or greater) Bottom Return (All "F" 19 1/8" Furnaces under 1650 CFM)
COMBUSTIBLE FLOOR SUBBASES		
NAHH001SB	Subbase Furnace ONLY: All 15 1/2" wide furnace models	
NAHH002SB	Subbase Furnace ONLY: All 19 1/4" wide furnace models	*8MPN075-100F
NAHH003SB	Subbase Furnace ONLY: All 22 3/4" wide furnace models	*8MPN100-125J
NAHH004SB	Subbase Furnace w/15 1/2" cased coil	Counterflow furnace *8MPN050-075B
NAHH005SB	Subbase Furnace w/19 1/4" cased coil	Counterflow furnace *8MPN075-100F
NAHH006SB	Subbase Furnace w/22 3/4" cased coil	Counterflow furnace *8MPN100-125J
MASONRY CHIMNEY ADAPTER		
NAHA001DH	Chimney adapter (6")	*8MPN050, 075, 100
NAHA002DH	Chimney adapter (7")	*8MPN125 & 150
VENT GUARD		
NAHA002VC	Downflow vent guard	All downflow applications
COIL ADAPTER		
NAHA001CA	Coil Adapter for Downflow Furnaces	All Multi-Position Furnaces In the Downflow Application

Fast part number

** Applications of *8MPN125 above 1650 CFM requires two side returns or NAHA001TK 20 x 25 duct stand-off filter kit or bottom return applications with the *8MPN125 & 150 use the 20 x 25 bottom return filter kit, NAHA002FF.

To achieve 2000 CFM with the stand-off filter kit you will still need a bottom return or 2 side filters.

UNIT DIMENSIONS



Drawing is representative some models may vary

DIMENSIONAL INFORMATION

Unit Capacity	Cabinet		Top		Bottom		Duct Size
	A	B	F	C	D		
*8MPN050B12	15 1/2	14	6	13 1/8	12 5/8		H
*8MPN075B12	19 1/8	17 5/8	7 3/4	2 1/8	14 3/4		J
*8MPN100F14	22 3/4	21 1/4	9 1/2	11 5/16	18 3/4		J
*8MPN100J20							
*8MPN125J20							
*8MPN150J20							

ALL DIMENSIONS IN INCHES (millimeters)

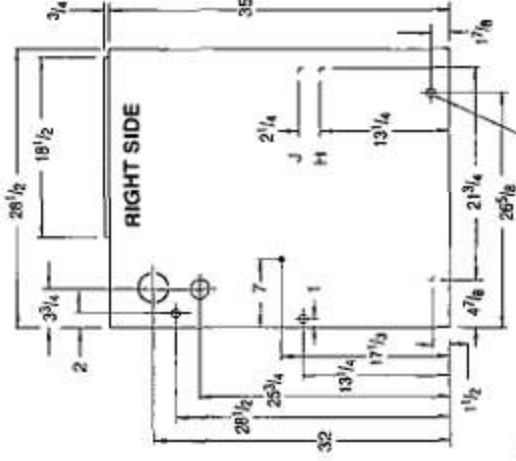
NOTE: Evaporator "A" coil drain pan dimensions may vary from furnace duct opening size. Always consult evaporator specifications for duct size requirements.

Unit is designed for bottom return or side return. Return air through back of unit is NOT allowed.

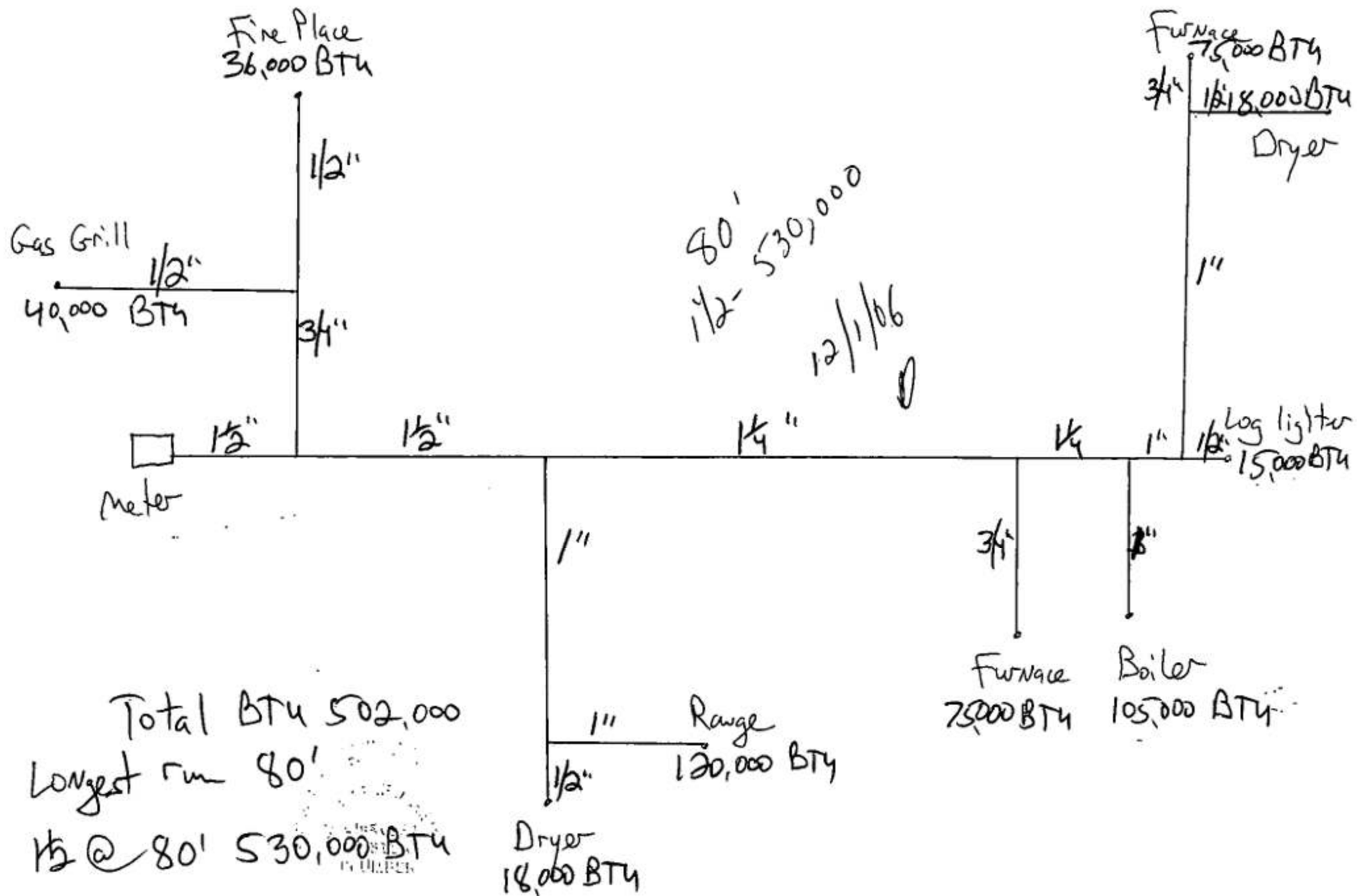
MINIMUM CLEARANCES TO COMBUSTIBLE MATERIALS FOR ALL UNITS

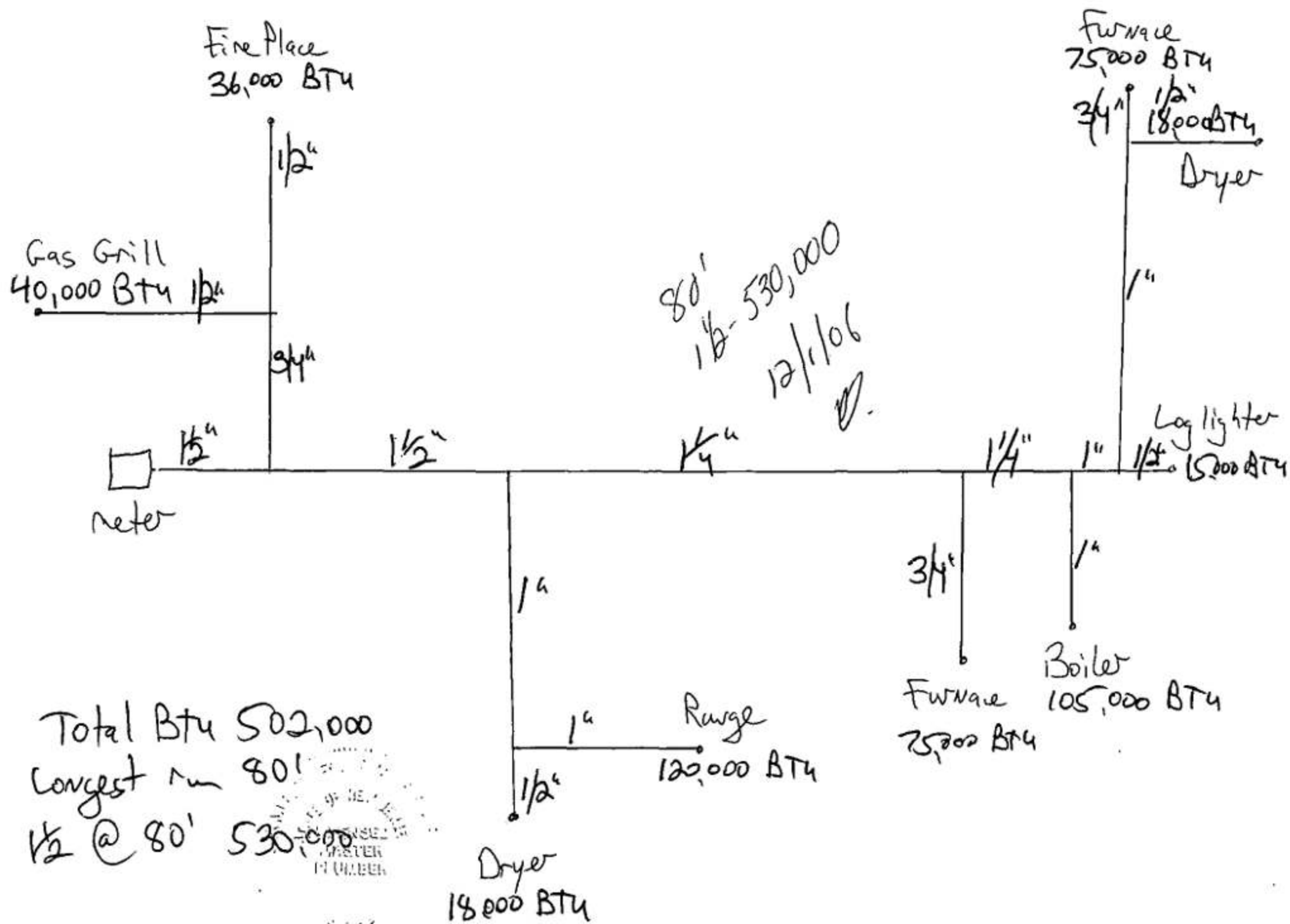
REAR	0
FRONT	3"
Recommended For Service	30"
ALL SIDES OF SUPPLY PLENUM	1"
SIDES	0
VENT	
Single Wall Vent	6"
Type B-1 Double Wall Vent	1"
TOP OF FURNACE	1"

Horizontal position: Line contact is permissible only between lines formed by intersections of top and two sides of furnace jacket, and building joists, studs or framing.



Plugged starting hole to cut side duct opening



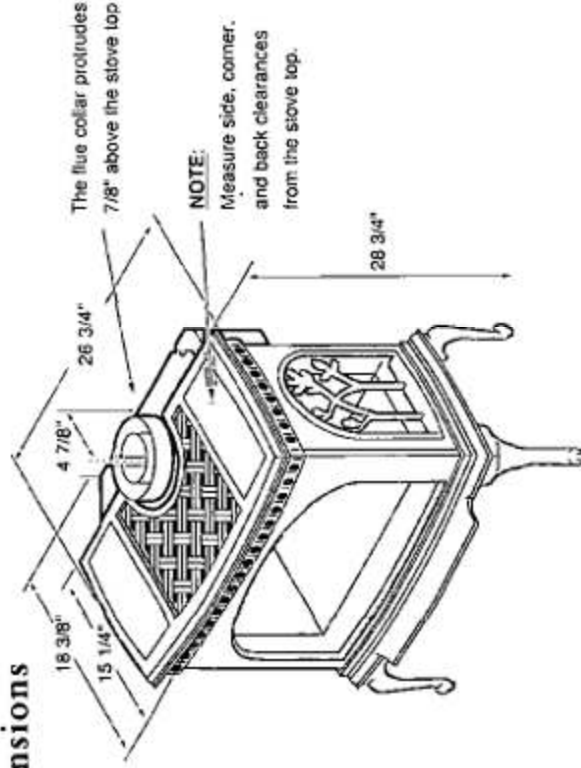


All Avalon firestyles are proudly made in the U.S.A.

Maximum Input 31,000 Btu/Hr.	Output from Low to High Low 16,608 Btu/Hr. High 26,815 Btu/Hr.	Overall Efficiency 86.5 % with maximum vent configuration	AFUE Up To 72.8%	Heating Capacity Up To 1,200 sq. ft. 1,500 sq. ft. with fan	Standing Pilot Heats even when the power is out	Room Fan 130 CFM (Optional)	Venting 6 5/8" Diameter
------------------------------------	--	--	------------------------	---	---	-----------------------------------	-------------------------------

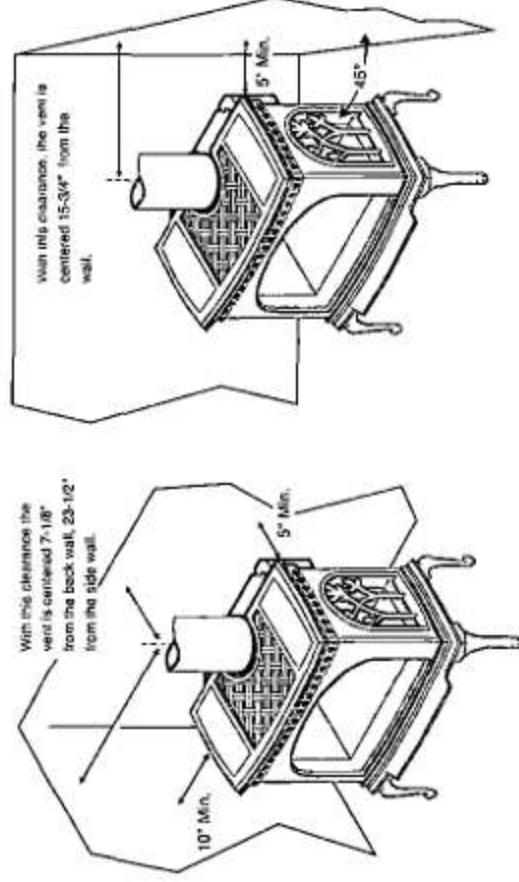
Gas appliance performance can be affected by negative pressure in a home and by prevailing atmospheric conditions. Contact local building or fire officials about restrictions and installation requirements in your area. Heating capacity may vary depending on the degree of home insulation, floor plan and the ambient temperature inside of the area in which you live.

Dimensions



Clearances To Combustibles

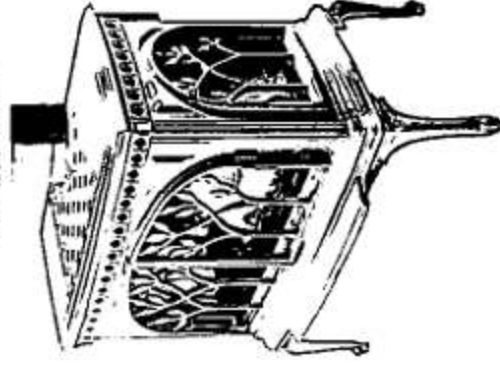
NOTE: Improper installation of your gas appliance or failure to operate it according to the guidelines detailed in the Owner's Manual may negate your warranty and endanger your home and family.



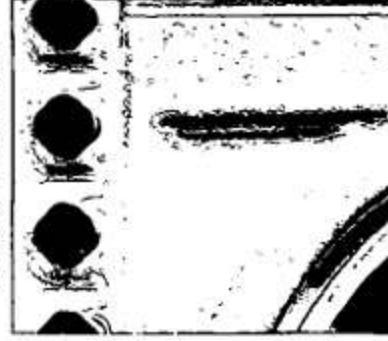
Can be installed directly on wood floors. Hearth pad required when installed on carpet or vinyl flooring

Special Edition Verde Mist*

This unique model has a beautiful light green color and porcelain cracked finish.



Porcelain Enamel
Cracked Finish Detail



*The special edition Verde Mist stove may require additional time for delivery.

Testing

Tested and certified by OMNI-Testing Laboratories Inc. Report # 02B-S-58-5, applicable sections of UL 307b, and CAN/CGA 2.17-M91. Must be installed in accordance with all local codes, if any; if not, follow ANSI Z223.1 & NFPA 54(88) and the requirements listed in the Owner's Manual.

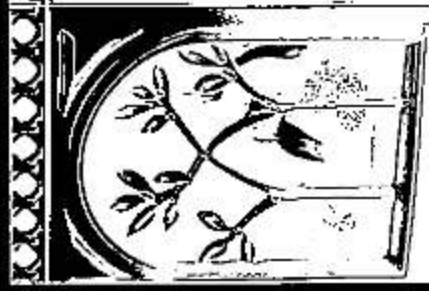
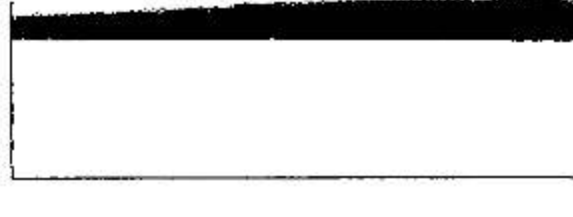
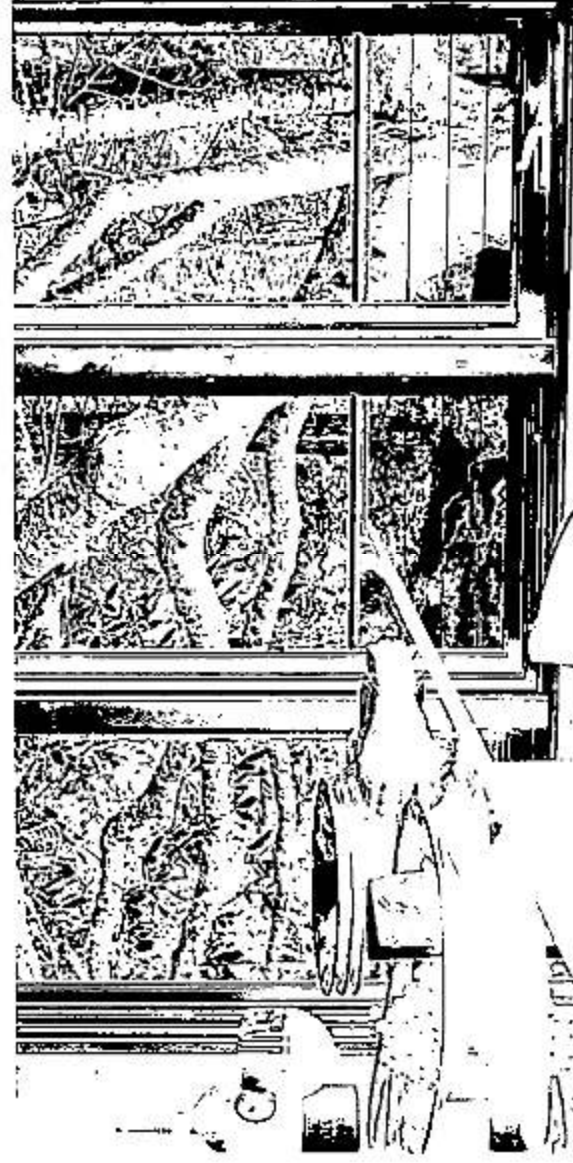
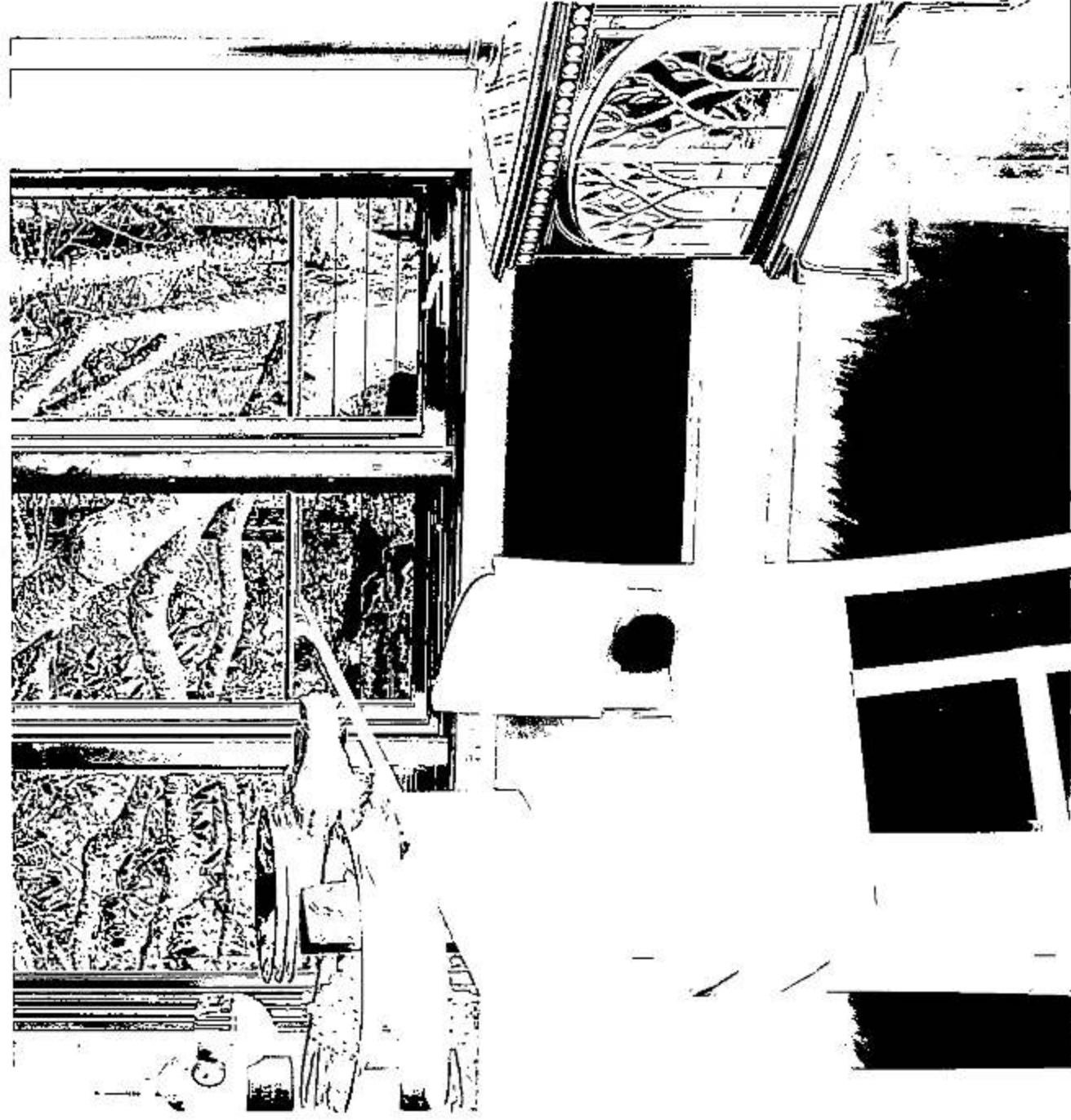
AVALON
Firestyles for Life
Visit us online:
www.avalonfirestyle.com



www.avalonfirestyle.com

We reserve the right to improve our products at any time without prior notification. Photos and illustrations are for descriptive purposes only. Copyright ©2005 #98800155

Black Metallic Paint



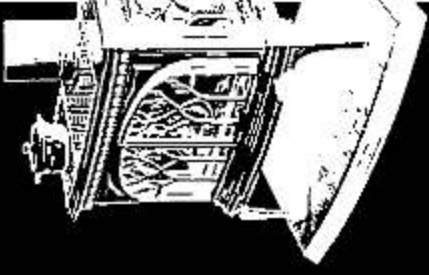
The side glass allows a full 180° viewing so everyone in the room can enjoy the beautiful



The quatrefoil is an ancient floral design utilized here as openings to enhance the natural convection of warm air and



The top surface can be used for simmering potpourri or with our soapstone steamer (shown at right).



Choose from four beautiful hearthpads - Soapstone, Spice Granite, Emerald Marble, or Travertine.

Majolica Brown Porcelain Enamel



Features As Amazing As The Design

The Tree of Life features a view of the fire on three sides for a huge 421 square inches of viewing area! The standard double doors can be positioned open (note the finely cast detail even on the inside of the door) or completely removed for unobstructed fire viewing.

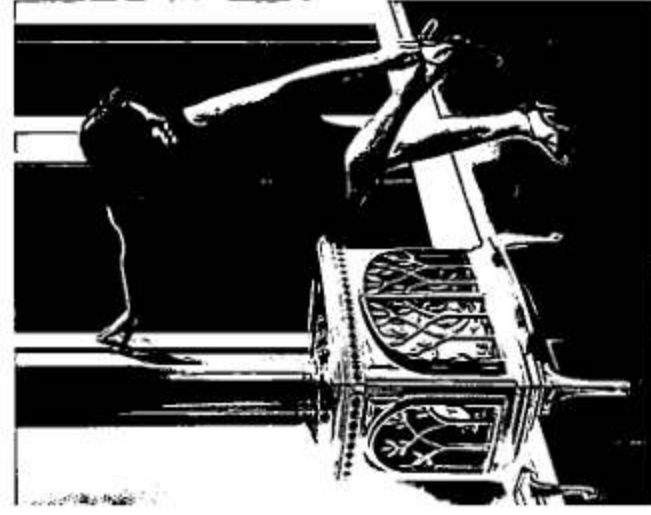
The advanced log design was specifically made with 180° viewing in mind. Each painstakingly hand-carved log can be enjoyed from any angle. The award-winning Ember-Fyre™ burner* presents the most realistic, wood-like fire found in any gas appliance. Unlike other gas appliances, the Ember-Fyre burner will produce an enjoyable fire with glowing embers even at its lowest flame setting.



Our patent pending self-balancing flue system is designed to produce the most beautiful flame with any approved vent configuration.

*Tree of Life*TM


AVALONTM
Firestyles for Life



Express your Firestyle

Your home is a reflection of your personal style. Why shouldn't your stove be the same? Avalon has beautifully designed products to let your personal expression shine through. No matter what kind of decorating taste you have, the Tree of Life stove will enhance it. Available in Black, Majolica Brown and Cashmere Taupe, simply choose the color that best blends with the look of your home to begin heating with style.

Shown in Cashmere Porcelain Enamel

The Tree of Life Story

Inspired by the gothic arches of cathedrals in Europe and a love of nature, the Tree of Life's delicate branch and leaf design is as captivating as its story. Early worshippers gathered in the woods before churches were ever built. Later, when cathedrals were constructed, this Tree of Life design was incorporated into their structures, reminiscent of the natural arches of trees and branches interlocking. Today many of us still commune with trees and nature, spending time in the outdoors to feel connected, refreshed and inspired.

The Home As Art Gallery

The Tree of Life design was born from a partnership with famed furniture designer, John Caldwell. He believes that stoves, like furniture, should be beautiful as well as functional, and add to the beauty and enjoyment of our homes.

(Info. for B.C.)

Specifications

Installation Options:

- Freestanding Stove
- Horizontal or Vertical Vent
- Residential or Mobile Home
- Straight or Corner Placement
- Bedroom Approved

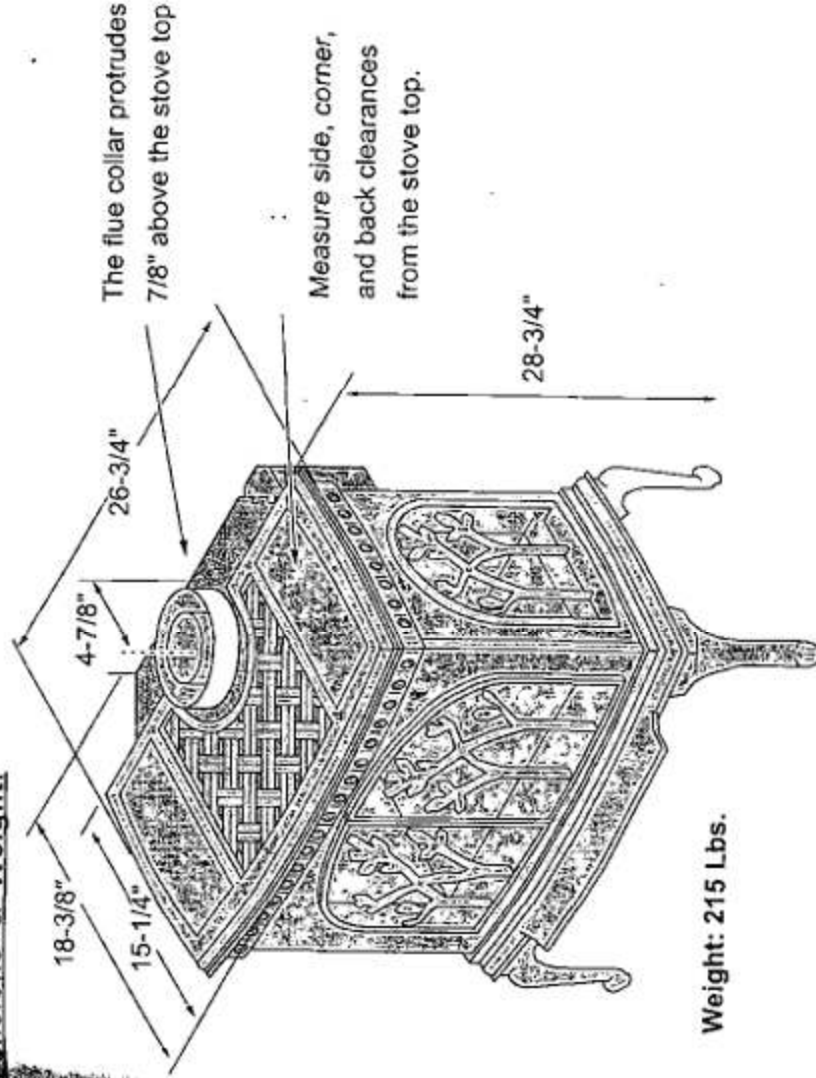
Fire™ Burner for "Wood Fire" Look
During Power Outages (millivolt system)
Efficiency
Thermostat or Remote Control
Blower for Quicker Heat Distribution
Operating Controls
Rate Heat Output
Maintenance

Heating Specifications:

Maximum Heating Capacity (in square feet)*	500 - 1,500 with Blower, 500 to 1,200 Without
Maximum BTU Input Per Hour	31,000
Heat from Low to High (in BTU's per hour)	16,608 to 26,815
State Efficiency (without blower)**	Up to 86.5 %
SE (without blower)	Up to 72.8 %

Heating capacity will vary depending on the home's floor plan, degree of insulation, and the outside temperature. Efficiency rating is a product of thermal efficiency rating determined under continuous operation independent of installed system.

Dimensions & Weight:



Electrical Specifications (for optional blower)

Electrical Rating 115 Volts, 1.3 Amps, 60 Hz (150 watts on high)

Fuel:

This heater is shipped in natural gas (NG) configuration but may be converted to propane (LP) using the included LP conversion kit. The sticker on top of the gas control valve will verify the correct fuel.

Travis Industries

100-01169

4050119

(This is info for B.C.)

78" inside

24" outside

w/cap.

Flashing

(Kathy P.)

color

Selection. ↓

2299.- Black.

Cash

2499.- Brown.

2699.- Verdi

→ less 15%

Brass	Numbers
	3216

(Kohelhoffen)

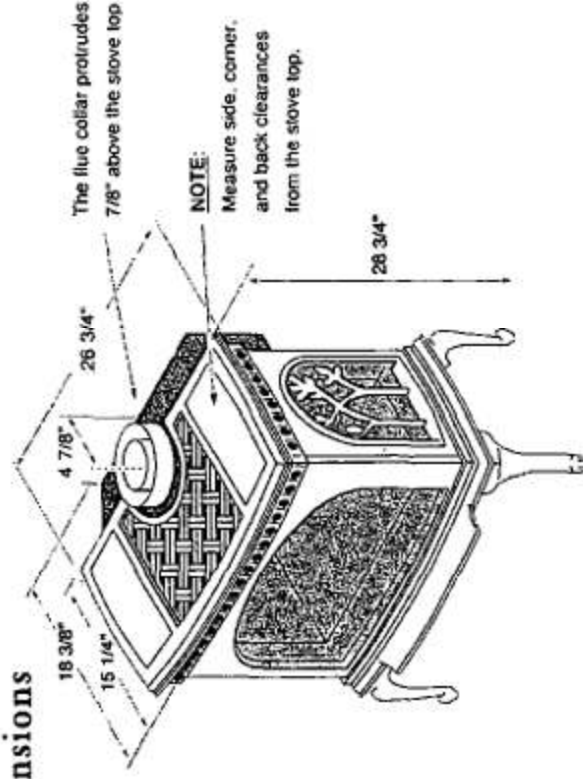
218.28
(Pats.)

36,000

Maximum Input 31,000 Btu/Hr.	Output from Low to High Low 16,608 Btu/Hr. High 26,815 Btu/Hr.	Overall Efficiency 86.5 % with maximum vent configuration	AFUE Up To 72.8%	Heating Capacity Up To 1,200 sq. ft. 1,500 sq. ft. with fan	Standing Pilot Heats even when the power is out	Room Fan 130 CFM (Optional)	Venting 6 5/8" Diameter
---------------------------------	--	---	------------------------	---	--	--------------------------------	----------------------------

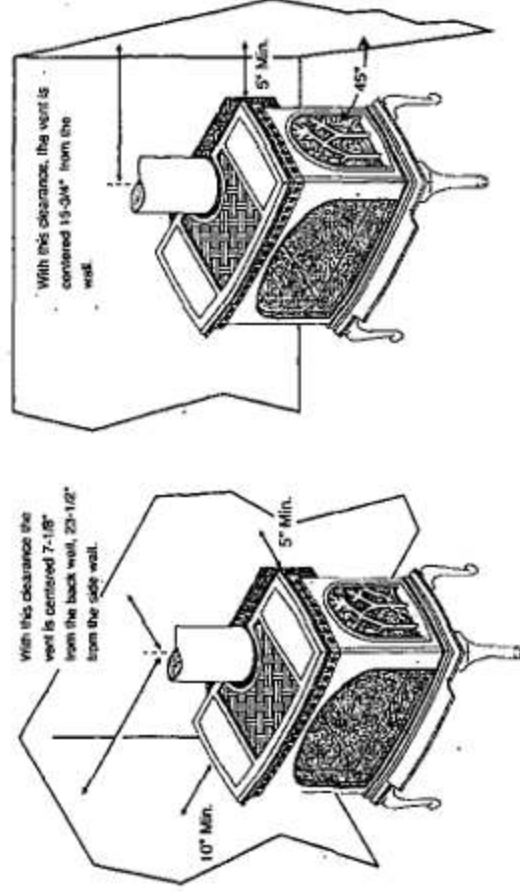
Gas appliance performance can be affected by negative pressure in a home and by prevailing atmospheric conditions. Contact local building or fire officials about restrictions and installation requirements in your area. Heating capacity may vary depending on the degree of home insulation, floor plan and the ambient temperature some of the area in which you live.

Dimensions



Clearances To Combustibles

NOTE: Improper installation of your gas appliance or failure to operate it according to the guidelines detailed in the Owner's Manual may negate your warranty and endanger your home and family.



Can be installed directly on wood floors. Hearth pad required when installed on carpet or vinyl flooring

Testing

Tested and certified by OMNI-Testing Laboratories Inc. Report # 028-S-58-5. applicable sections of UL 307b, and CAN/CGA 2.17-M91. Must be installed in accordance with all local codes, if any; if not, follow ANSI Z223.1 & NFPA 54(88) and the requirements listed in the Owner's Manual.

36,000

Firestyles for Life

Visit us online:
www.avalonfirestyle.com

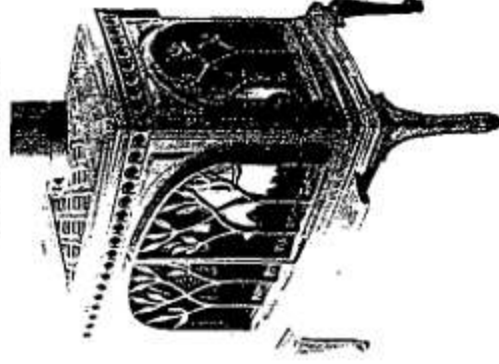


We reserve the right to improve our products at any time without prior notification. Photos and illustrations are for descriptive purposes only. Copyright © 2003, #18500152

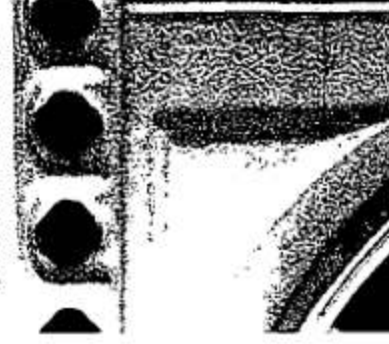
36,000

Special Edition Verde Mist*

This unique model has a beautiful light green color and porcelain cracked finish.



Porcelain Enamel
Cracked Finish Detail



*The special edition Verde Mist stove may require additional time for delivery.

Bldg

Elect

Fire

Plumbing

(Please mark subcode)

CONTROL NUMBER 0879

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

Resubmit
6/12/08

ADDRESS OF APPLICATION: 436 Esplanade

DATE REVIEWED: 5-30-06

REVIEWED BY: FMM

CONTACT CALLED/FAXED: 292-2921

- ① Res-check & Plans Do Not Agree For Wall Insulation R-13-R-19
- ② Does Re-Framed Rear Sunroom Comply With R-602.
Regarding Braced Walls - (Sec Narrow wall Near Door)
- ③ Drawing Notes 1-Hr Rated Ceiling in Garage But No mention
OF Support Walls (Required IF Habitable Space Above.)

Bldg

Elect

Fire

Plumbing

(Please mark subcode)

CONTROL NUMBER 979

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION: 436 Esp / anade

DATE REVIEWED: 5 2406

REVIEWED BY: UM

CONTACT CALLED/FAXED: _____

Gary Blau

292 2920

- ① Plans do not meet code
- ② Sewer location

Submitted
26.06.06

RONALD E. RHEAUME, AIA

A R C H I T E C T

(609) 208-0884

4 Hidden Hollow Drive, Yardville, New Jersey 08620

June 4, 2006

Building Official
Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

RE: Proposed second floor addition
Block 958.21; Lots 15, 16 and 17
436 Esplanade
Control number 0929

Dear Building Official,

The following is in response to your review comments dated 5-30-06 and are as follows:

1. The project does have both 2x6 (R-19) and 2x4 (R-13) stud walls. The front living room wall and the sunroom walls are both 2x6 construction. The Res-check certificate is attached.
2. The rear sunroom does comply with braced wall construction. The detail attached to the specification indicates the approved method, also attached to this letter.
3. The garage support walls will be rated. See attached revised plan.

Should you have any questions please call.

Sincerely,


Ronald E. Rheaume, AIA
Architect

Bldg.

Elect

Fire

Plumbing

(Please mark subcode)

CONTROL NUMBER 0879

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION: 436 Esplanade

DATE REVIEWED: 5-30-06

REVIEWED BY: FMM

CONTACT CALLED/FAXED: 292-2921

- ① Res-check & Plans Do Not Agree For Wall Insulation R13-R19
- ② Does Re-Framed Rear Sunroom Comply with R-602.
Regarding Braced walls - (See narrow wall near door)
- ③ Drawing Notes 1-HR Rated Ceiling in Garage But No mention
of Support walls (Required if Habitable Space Above)

Permit Number

REScheck Compliance Certificate

New Jersey Energy Subcode

REScheck Software Version 3.5 Release 1b
Data filename: Untitled.rck

Checked By/Date

TITLE: Battish Residence 436 Esplanade, Brick, NJ Lots 15, 16, and 17; Block 958.21

COUNTY: Ocean
STATE: New Jersey
HDD: 5000
CONSTRUCTION TYPE: Single Family

DATE: 06/04/06
DATE OF PLANS: 11/17/05

PROJECT INFORMATION:
Second floor Addition and renovation
Project number 1399

COMPANY INFORMATION:
Ronald E. Rheume, AIA
Architect

COMPLIANCE: Passes

Maximum UA = 298
Your Home UA = 262
12.1% Better Than Code (UA)

	Gross Area or Perimeter	Cavity R-Value	Cont. R-Value	Glazing or Door	
				U-Factor	UA
Ceiling 1: Flat Ceiling or Scissor Truss	1232	30.0	0.0		43
Wall 1: Wood Frame, 16" o.c.	890	13.0	0.0		52
Window 1: Wood Frame: Double Pane	243			0.490	119
Door 1: Glass	18			0.480	9
Wall 2: Wood Frame, 16" o.c.	646	19.0	0.0		39
Furnace 1: Forced Hot Air, 90 AFUE					
Air Conditioner 1: Electric Central Air, 10 SEER					

COMPLIANCE STATEMENT: The proposed building design described here is consistent with the building plans, specifications, and other calculations submitted with the permit application. The proposed building has been designed to meet the New Jersey Energy Subcode requirements in REScheck Version 3.5 Release 1b (formerly MECcheck) and to comply with the mandatory requirements listed in the REScheck Inspection Checklist.

Builder/Designer

Date

6/5/06

REScheck Inspection Checklist

New Jersey Energy Subcode

REScheck Software Version 3.5 Release 1b

DATE: 06/04/06

TITLE: Battish Residence 436 Esplanade, Brick, NJ Lots 15, 16, and 17; Block 958.21

Bldg.	
Dept.	
Use	
[]	Ceilings:
	1. Ceiling 1: Flat Ceiling or Scissor Truss, R-30.0 cavity insulation
	Comments: _____
[]	Above-Grade Walls:
	1. Wall 1: Wood Frame, 16" o.c., R-13.0 cavity insulation
	Comments: _____
[]	2. Wall 2: Wood Frame, 16" o.c., R-19.0 cavity insulation
	Comments: _____
[]	Windows:
	1. Window 1: Wood Frame: Double Pane, U-factor: 0.490
	For windows without labeled U-factors, describe features:
	# Panes _____ Frame Type _____ Thermal Break? [] Yes [] No
	Comments: _____
[]	Doors:
	1. Door 1: Glass, U-factor: 0.480
	Comments: _____
[]	Heating and Cooling Equipment:
	1. Furnace 1: Forced Hot Air, 90 AFUE or higher
	Make and Model Number _____
[]	2. Air Conditioner 1: Electric Central Air, 10 SEER or higher
	Make and Model Number _____
[]	Air Leakage:
	Joints, penetrations, and all other such openings in the building envelope that are sources of air leakage must be sealed.
[]	Recessed lights must be 1) Type IC rated, or 2) installed inside an appropriate air-tight assembly with a 0.5" clearance from combustible materials. If non-IC rated, the fixture must be installed with a 3" clearance from insulation.
[]	Vapor Retarder:
	Required on the warm-in-winter side of all non-vented framed ceilings, walls, and floors.
[]	Materials Identification:
	Materials and equipment must be identified so that compliance can be determined.
[]	Manufacturer manuals for all installed heating and cooling equipment and service water heating equipment must be provided.
[]	Insulation R-values, glazing U-factors, and heating equipment efficiency must be clearly marked on the building plans or specifications.
[]	Duct Insulation:
	Ducts in unconditioned spaces must be insulated to R-5.
	Ducts outside the building must be insulated to R-6.5.

Duct Construction:

[] All ducts must be sealed with mastic and fibrous backing tape. Pressure-sensitive tape may be used for fibrous ducts. Duct tape is not permitted.
[] The HVAC system must provide a means for balancing air and water systems.

Temperature Controls:

[] Thermostats are required for each separate HVAC system. A manual or automatic means to partially restrict or shut off the heating and/or cooling input to each zone or floor shall be provided.

Circulating Hot Water Systems:

[] Insulate circulating hot water pipes to the levels in Table 1.

Swimming Pools:

[] All heated swimming pools must have an on/off heater switch and require a cover unless over 20% of the heating energy is from non-depletable sources. Pool pumps require a time clock.

Heating and Cooling Piping Insulation:

[] HVAC piping conveying fluids above 120 °F or chilled fluids below 55 °F must be insulated to the levels in Table 2.

Table 1: Minimum Insulation Thickness for Circulating Hot Water Pipes.

Heated Water Temperature (F)	Insulation Thickness in Inches by Pipe Sizes		
	Non-Circulating Runouts		Circulating Mains and Runouts
	Up to 1"	Up to 1.25"	1.5" to 2.0" Over 2"
170-180	0.5	1.0	1.5 2.0
140-160	0.5	0.5	1.0 1.5
100-130	0.5	0.5	0.5 1.0

Table 2: Minimum Insulation Thickness for HVAC Pipes.

Piping System Types	Fluid Temp. Range (F)		Insulation Thickness in Inches by Pipe Sizes		
			2" Runouts	1" and Less	1.25" to 2" 2.5" to 4"
Heating Systems					
Low Pressure/Temperature	201-250	1.0	1.0	1.5	2.0
Low Temperature	120-200	0.5	0.5	1.0	1.5
Steam Condensate (for feed water)	Any	1.0	1.0	1.0	2.0
Cooling Systems					
Chilled Water, Refrigerant, and Brine	40-55	0.5	0.5	0.75	1.0
	Below 40	1.0	1.0	1.5	1.5

NOTES TO FIELD (Building Department Use Only)

BEACH CRAFT CONSTRUCTION, LLC

P.O. BOX 455

3216 ATLANTIC AVE.

ALLENWOOD, NJ 08720

(732)292-2920 • FAX (732) 292-2921

FACSIMILE TRANSMITTAL SHEET

TO:

Marcel Renson

FROM:

Heather

COMPANY:

Bricktown Building Dept./Electrical

DATE:

6/5/2006

FAX NUMBER:

(732) 262-8954

TOTAL NO. OF PAGES INCLUDING COVER:

2

PHONE NUMBER:

SENDER'S REFERENCE NUMBER:

RE:

**436 Esplanade
Steve Batich**

YOUR REFERENCE NUMBER:

☐ URGENT ☐ # FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES

Mr. Renson,

Attached is the letter from our electrical contractor that you requested regarding 436 The Esplanade, Block 958.21, Lot 15, 16, and 17. Please contact me at the above numbers if you require anything further.

Thank you,
Heather

Maynard Electric, Inc.

1900 Wall Church Road
Wall, New Jersey 07719
Phone 732-449-1222
Fax 732-449-4738
License No. 11155

TO: MARCEL PENSON BRICK SUB CODE8

REF. 436 ESFLADE BRICK

MAYNARD ELECTRIC INC. UNDERSTANDS THAT ANY ELECTRICAL DEFICIENCIES FOUND ON PLANS WILL BE CORRECTED ON SITE AND THAT THE NEW INSTALLATION MUST CONFORM TO 2003 NEC STANDARDS.
A NEW 200 AMP ELECTRICAL SERVICE WILL BE INSTALLED AT SITE WITH METER PAN AND MAIN PANEL AT THE SAME LOCATION AT NE CORNER OF BASEMENT AND LATERAL TO NEAR POLE.



GEORGE E MAYNARD

Permit Number

REScheck Compliance Certificate

Checked By/Date

New Jersey Energy Subcode

REScheck Software Version 3.5 Release 1b

Data filename: C:\Documents and Settings\Ron Rheume\My Documents\Projects\1399 Batich\Untitled.rck

TITLE: Battish Residence 436 Esplanade, Brick, NJ Lots 15, 16, and 17; Block 958.21

COUNTY: Ocean

STATE: New Jersey

HDD: 5000

CONSTRUCTION TYPE: Single Family

DATE: 02/03/06

DATE OF PLANS: 11/17/05

PROJECT INFORMATION:

Second floor Addition and renovation
Project number 1399

COMPANY INFORMATION:

Ronald E. Rheume, AIA
Architect

COMPLIANCE: Passes

Maximum UA = 298

Your Home UA = 276

7.4% Better Than Code (UA)

Gross Area or Perimeter	Cavity R-Value	Cont. R-Value	Glazing or Door U-Factor	UA
-------------------------------	-------------------	------------------	--------------------------------	----

Ceiling 1: Flat Ceiling or Scissor Truss

Wall 1: Wood Frame, 16" o.c.

Window 1: Wood Frame: Double Pane

Door 1: Glass

Furnace 1: Forced Hot Air, 90 AFUE

Air Conditioner 1: Electric Central Air, 10 SEER

1232	30.0	0.0		43
1536	13.0	0.0		105
243			0.490	119
18			0.480	9

COMPLIANCE STATEMENT: The proposed building design described here is consistent with the building plans, specifications, and other calculations submitted with the permit application. The proposed building has been designed to meet the New Jersey Energy Subcode requirements in REScheck Version 3.5 Release 1b (formerly MECcheck) and to comply with the mandatory requirements listed in the REScheck Inspection Checklist.

Builder/Designer

Date

2/3/06

REScheck Inspection Checklist

New Jersey Energy Subcode

REScheckSoftware Version 3.5 Release 1b

DATE: 02/03/06

TITLE: Battish Residence436 Esplanade, Brick, NJLots 15, 16, and 17; Block 958.21

Bldg.	
Dept.	
Use	
[]	
Ceilings:	
1.	Ceiling 1: Flat Ceiling or Scissor Truss, R-30.0 cavity insulation
	Comments: _____
[]	
Above-Grade Walls:	
1.	Wall 1: Wood Frame, 16" o.c., R-13.0 cavity insulation
	Comments: _____
[]	
Windows:	
1.	Window 1: Wood Frame:Double Pane, U-factor: 0.490
	For windows without labeled U-factors, describe features:
	# Panes _____ Frame Type _____ Thermal Break? [] Yes [] No
	Comments: _____
[]	
Doors:	
1.	Door 1: Glass, U-factor: 0.480
	Comments: _____
[]	
Heating and Cooling Equipment:	
1.	Furnace 1: Forced Hot Air, 90 AFUE or higher
	Make and Model Number _____
2.	Air Conditioner 1: Electric Central Air, 10 SEER or higher
	Make and Model Number _____
[]	
Air Leakage:	
[]	Joints, penetrations, and all other such openings in the building envelope that are sources of air leakage must be sealed.
[]	Recessed lights must be 1) Type IC rated, or 2) installed inside an appropriate air-tight assembly with a 0.5" clearance from combustible materials. If non-IC rated, the fixture must be installed with a 3" clearance from insulation.
[]	
Vapor Retarder:	
[]	Required on the warm-in-winter side of all non-vented framed ceilings, walls, and floors.
[]	
Materials Identification:	
[]	Materials and equipment must be identified so that compliance can be determined.
[]	Manufacturer manuals for all installed heating and cooling equipment and service water heating equipment must be provided.
[]	Insulation R-values, glazing U-factors, and heating equipment efficiency must be clearly marked on the building plans or specifications.
[]	
Duct Insulation:	
[]	Ducts in unconditioned spaces must be insulated to R-5.
	Ducts outside the building must be insulated to R-6.5.
[]	
Duct Construction:	
[]	

[] All ducts must be sealed with mastic and fibrous backing tape. Pressure-sensitive tape may be used for fibrous ducts. Duct tape is not permitted.

[] The HVAC system must provide a means for balancing air and water systems.

Temperature Controls:

[] Thermostats are required for each separate HVAC system. A manual or automatic means to partially restrict or shut off the heating and/or cooling input to each zone or floor shall be provided.

Circulating Hot Water Systems:

[] Insulate circulating hot water pipes to the levels in Table 1.

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140-160	0.5	0.5	1.0 1.5
100-130	0.5	0.5	0.5 1.0

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Piping System Types	Fluid Temp. Range (F)		Insulation Thickness in Inches by Pipe Sizes		
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Heating Systems					
Low Pressure/Temperature	201-250	1.0	1.5	1.5	2.0
Low Temperature	120-200	0.5	1.0	1.0	1.5
Steam Condensate (for feed water)	Any	1.0	1.0	1.5	2.0
Cooling Systems					
Chilled Water, Refrigerant, and Brine	40-55	0.5	0.5	0.75	1.0
	Below 40	1.0	1.0	1.5	1.5

NOTES TO FIELD (Building Department Use Only)

RONALD E. RHEAUME, AIA

A R C H I T E C T

(609) 208-0884

4 Hidden Hollow Drive, Yardville, New Jersey 08620

February 3, 2006

Zoning Officer
Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

**RE: Proposed second floor addition
Block 958.21; Lots 15, 16 and 17
436 Esplanade**

Dear Kate,

1. Below are the building height regulations which are in compliance with Ordinance 354-2D-03 for the above referenced project.

R-10 Zone

• Maximum Building Height Proposed

Stories	Eaves	Building	Feet/Ridge
2	18'-6"	29'-0"	29'-0"

2. All existing bedrooms and adjacent halls will be provided with new Smoke detectors and carbon monoxide detectors. See drawings and project specifications.

Should you have any questions please call.

Sincerely,

Ronald E. Rheume, AIA
Architect

Batich Residence

463 The Esplanade

Bricktown, NJ

Block 958.21

Lots 15,16,17

Existing Smoke & Carbon Monoxide Detectors**1st Floor:**

1 battery powered smoke detector- hallway

2nd Floor:

1 battery powered smoke detector- hallway

Basement:

1 battery powered smoke detector

- No carbon monoxide detectors at this time.
- See letter from architect Ronald Rheume for list of proposed smoke & carbon monoxide detectors.

Bldg

Elect

Fire

Plumbing

(Please mark subcode)

CONTROL NUMBER 06-0979

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

ADDRESS OF APPLICATION: 436 FRANKLIN AVE

DATE REVIEWED: 5/16/06

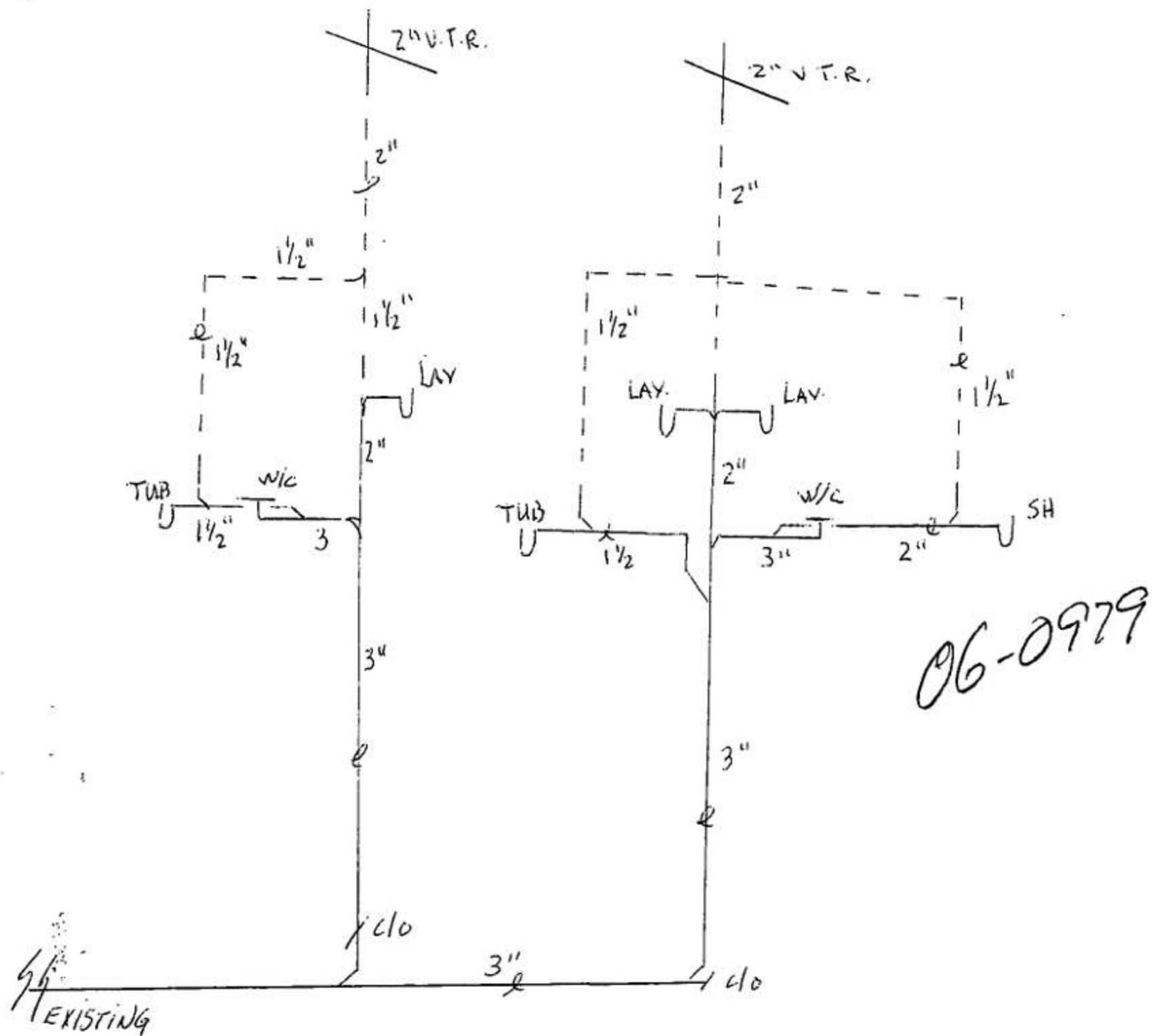
REVIEWED BY: MARK H. BAARD

CONTACT CALLED/FAXED: Gray Blank

- Called - 5/16/06

① - D.W. Schematic -

② - 1" WATER UPGRADE REQUIRED - EXISTING 1" ?



P. 01

732 458 5378

BRICK MUA

MAY-23-2008 TUE 04:15 PM

THE BRICK TOWNSHIP MUNICIPAL UTILITIES AUTHORITY
1551 HIGHWAY 86 WEST BRICK, NEW JERSEY 08724 458-7000

WATER SERVICE PERMIT

Block: 958.21 Lot: 15
436 Esplanade

upgrade to 1" serv.

Batich, Stephen
436 The Esplanade
Brick NJ 08724-4506

ACCOUNT # N580000 METER # _____ METER MFG. _____

SIZE OF SVC LINE 1" METER SIZE 1"

CONNECTION FEE \$ _____
05/23/06

INSPECTIONS 15.00	Date	Insp.	Comment	Inspector
64.00	1st	2nd		
79.00				
A. Service Line				
B. Curb Connection				
C. House Conn. & Mtr				
D. Cross-Connection				

h. m. s.
Homeowner/Applicant

Inspector

Mark a Bernie,

Got Permit



FRAB

06-0979

Beach Craft Construction LLC

P.O. Box 455
Allenwood, NJ 08720
732-292-2920 fax 732-292-2921

June 6, 2006

Marcel Renson
Bricktown Building Dept.
401 Chambers Bridge Rd.
Bricktown, NJ 08723

Dear Mr. Renson,

Enclosed is the letter you requested regarding the Batich residence at 436 The Esplanade,
Block 958.21, Lot 15, 16, and 17. I also faxed it to your office on June 6. Please contact
me at the above numbers if you require any further information.

Thank you,
Heather Swanson

6/6/06

Maynard Electric, Inc.

1900 Wall Church Road
Wall, New Jersey 07719
Phone 732-449-1222
Fax 732-449-4738
License No. 11155

TO: MARCEL PENSON BRICK SUB CODE

REF. 436 ESPLADE BRICK.

MAYNARD ELECTRIC INC. UNDERSTANDS THAT ANY ELECTRICAL DEFICIENCIES FOUND ON PLANS WILL BE CORRECTED ON SITE AND THAT THE NEW INSTALLATION MUST CONFORM TO 2005 NEC STANDARDS.
A NEW 200 AMP ELECTRICAL SERVICE WILL BE INSTALLED AT SITE WITH METER PAN AND MAIN PANEL AT THE SAME LOCATION AT NE CORNER OF BASEMENT AND LATERAL TO NEAR POLE.



GEORGE E MAYNARD

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER Bartlett DATE 5/16/06
 PROPERTY ADDRESS 436 ESPERANZA BLOCK 958.21 LOT 15.16.17
 ZONING _____ USE GROUP _____
 CONTRACTOR _____ LICENSE # REGISTRATION _____

WATER MAIN SIZE	WATER PRESSURE	(sfu)	WATER UNITS	(dfu)	SEWER MAIN SIZE	DRANAGE
PLUMBING FIXTURES	NUMBER					
1. BATHROOM GROUP	<u>4.5</u>	()	<u>10.5</u>	()		
2. KITCHEN GROUP	<u>1</u>	()	<u>2.0</u>	()		
3. WATER CLOSETS		()		()		
4. LAVATORY		()		()		
5. BATH TUB		()		()		
6. SHOWER STALL	<u>1</u>	()	<u>2.0</u>	()		
7. KITCHEN SINK		()		()		
8. SERVICE SINK		()		()		
9. LAUNDRY TRAY		()		()		
10. DISHWASHER	<u>1</u>	()	<u>4.0</u>	()		
11. WASHING MACHINE		()		()		
12. URINAL		()		()		
13. FLOOR DRAIN		()		()		
14. DRINK FOUNTAIN		()		()		
15. AIR CONDITION WATER COOLED		()		()		
16. DENTAL UNIT		()		()		
17. LAWN SPRINKLE		()		()		
18. FIRE SPRINKLE		()		()		
19. HOSE BIBS	<u>4</u>	()	<u>5.5</u>	()		
TOTALS			<u>24.0</u>			

GALLONS PER MINUTE _____
 SIZE of SERVICE 1"
 APPROVED BY: Mark H. Howard
 DATE: 5/16/06

** Transmit Conf. Report **

P.1

May 16 2006 9:07

Telephone Number	Mode	Start	Time	Page	Result	Note
7322922921	NORMAL	16, 9:06	0:27*	1	* O K	

Bldg

Elect

Fire

Plumbing

(Please mark subcode)

CONTROL NUMBER 06-0979TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESSADDRESS OF APPLICATION: 436 ASPLANADEDATE REVIEWED: 5/16/06REVIEWED BY: MARK H. BAARDCONTACT CALLED/FAXED: COBY BLANK -① - D.W. SCHEMATIC -② - 1" WATER UPGRADE REQUIRED - EXISTING 1" ?

SIZING FOR WATER AND SEWER SERVICES

PROPERTY OWNER Bartlett DATE 5/16/06
 PROPERTY ADDRESS 436 ESPERANZA BLOCK 958.21 LOT 15, 16, 17
 ZONING _____ USE GROUP _____

CONTRACTOR _____ LICENSE # REGISTRATION _____
 WATER MAIN SIZE _____ WATER PRESSURE _____ SEWER MAIN SIZE _____

PLUMBING FIXTURES	NUMBER	(sfu)	WATER UNITS	(dfu)	DRANAGE
1. BATHROOM GROUP	<u>4.5</u>	()	<u>10.5</u>	()	()
2. KITCHEN GROUP	<u>1</u>	()	<u>2.0</u>	()	()
3. WATER CLOSETS	_____	()	_____	()	()
4. LAVATORY	_____	()	_____	()	()
5. BATH TUB	_____	()	_____	()	()
6. SHOWER STALL	<u>1</u>	()	<u>2.0</u>	()	()
7. KITCHEN SINK	_____	()	_____	()	()
8. SERVICE SINK	_____	()	_____	()	()
9. LAUNDRY TRAY	_____	()	_____	()	()
10. DISHWASHER	<u>1</u>	()	<u>4.0</u>	()	()
11. WASHING MACHINE	_____	()	_____	()	()
12. URINAL	_____	()	_____	()	()
13. FLOOR DRAIN	_____	()	_____	()	()
14. DRINK FOUNTAIN	_____	()	_____	()	()
15. AIR CONDITION WATER COOLED	_____	()	_____	()	()
16. DENTAL UNIT	_____	()	_____	()	()
17. LAWN SPRINKLE	_____	()	_____	()	()
18. FIRE SPRINKLE	_____	()	_____	()	()
19. HOSE BIBS	<u>4</u>	()	<u>5.5</u>	()	()
TOTALS			<u>24.0</u>		

GALLONS PER MINUTE _____
 SIZE of SERVICE 1"
 APPROVED BY: Mark H. BARNES
 DATE: 5/16/06

TOWNSHIP OF BRICK

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

Joseph C. Scarpelli, Mayor

Township Council:

Anthony Matthews - President
Stephen C. Acropolis - Vice-President
Kathy M. Russell
Joseph Sangiovanni
Ruthanne Scaturro
Michael A. Thullen, Sr.
Dan Toth



Department of Engineering
Office of the Municipal Engineer
(732) 262-1040
Fax: (732) 262-8954
<http://www.twp.brick.nj.us>

Date: 1/26/06

PLOT PLAN EXEMPT FORM

X Block: 958.21 Lot: 15, 16, 17

Property Address: 436 The Esplanade, Bricktown, NJ

1. Stephen Batich of 436 The Esplanade, Bricktown, NJ
(name) (address)

request to be exempt from the plot plan requirement for an addition, fence, shed, deck, pool, retaining wall, etc. as outlined in the Brick Land Use Book, Chapter 190.31, Part B.

X [Signature]
Applicant's Signature

The following shall be submitted with this request:

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

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

FOR OFFICE USE ONLY

Approved on: 5/15/06

Signed: [Signature]

Rejected on: _____

Signed: _____

Comments: _____

Batich Residence

463 The Esplanade
Bricktown, NJ
Block 958.21
Lots 15,16,17

Existing Plumbing Fixtures

1st Floor

2 toilets
3 sinks
1 tub/shower
gas range
dishwasher
washing machine/dryer

2nd Floor

2 toilets
3 sinks
2 tubs
1 shower

Basement

1 sink
1 toilet
1 shower

Exterior

4 hose bibs

ADDITION CHECK LIST

1. Construction jacket signed & completed	Yes ☒	No ☐
2. Zoning application completed	Yes ☒	No ☐
3. Engineering form completed	Yes ☒	No ☐
4. Two true size surveys showing dimensions & setbacks of existing and proposed structures	Yes ☒	No ☐
5. Bldg/Plng/Fire/Electrical subcode information completed	Yes ☒	No ☐
6. Completed section VI on jacket - building characteristics	Yes ☒	No ☐
7. Separate addn/alteration cost	Yes ☒	No ☐
8. Two sets of plans-architecturals signed and sealed homeowner drawings-all pages signed(existing & proposed floor plan)	Yes ☒	No ☐
9. Brochures - Furnace, Boiler, AC , Fireplace (wood/gas)	Yes ☒	No ☐
10. Gas pipe drawing if applicable	Yes ☒	No ☐
11. DWV schematic if applicable	Yes ☒	No ☐
12. List of Existing Plumbing Fixtures - on paper	Yes ☒	No ☐
13. Detail of all electrical locations (receptacles, switches, detectors, etc).	Yes ☒	No ☐
14. Detail of existing & proposed smoke & carbon monoxide detectors.	Yes ☒	No ☐
15. If using engineered floor joist(TJI) a joist layout showing blocking where applicable must be submitted with plans (also on jobsite with plans) (from lumber co.) 2 copies	Yes ☒	No ☐
16. Completed debris form	Yes ☒	No ☐
17. 2nd Story additions require engineer certification for foundation if the plans are not done by an architect	Yes ☒	No ☐
18. Soil borings showing seasonal high water table required on any new basements	Yes ☒	No ☐
19. Model Energy Code must be (www.energycodes.gov) site spec address at Bk & Lf	Yes ☒	No ☐

Note: We are now using the International Building Code Effective May 6, 2003

1st 2 pgs. of blueprints
need dimensions clearly
marked to match dimensions
on survey — all outside
perimeters.

RONALD E. RHEAUME, AIA

A R C H I T E C T

(609) 208-0884

4 Hidden Hollow Drive, Yardville, New Jersey 08620

February 3, 2006

Zoning Officer
Township of Brick
401 Chambers Bridge Road
Brick, NJ 08723

**RE: Proposed second floor addition
Block 958.21; Lots 15, 16 and 17
436 Esplanade**

Dear Kate,

1. Below are the building height regulations which are in compliance with Ordinance 354-2D-03 for the above referenced project.

R-10 Zone

• Maximum Building Height Proposed

Stories	Eaves	Building	Feet/Ridge
2	18'-6"	29'-0"	29'-0"

2. All existing bedrooms and adjacent halls will be provided with new Smoke detectors and carbon monoxide detectors. See drawings and project specifications.

Should you have any questions please call.

Sincerely,

Ronald E. Rheume, AIA
Architect

*let
2/9/06*

TOWNSHIP OF BRICK

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



Joseph C. Scarpelli, Mayor

Township Council:

Anthony Matthews - President
Stephen C. Acropolis - Vice-President
Kathy M. Russell
Joseph Sangiovanni
Ruthanne Scaturro
Michael A. Thulen, Sr.
Dan Toth

February 28, 2006

Gary Blank
Beach Craft Builders, LLC
PO Box 455
Allenwood, NJ 08720

Re: Block: 958.21 Lot: 15
436 The Esplanade

Dear Mr. Blank,

Your zoning permit application for an addition on the referenced property cannot be approved because the application is incomplete.

- Two accurate plot plans, drawn by a licensed surveyor or an engineer, as per Section 190-31 of the Township Code must be submitted for review. The plot plan must show all existing and proposed structures, all setbacks from property lines, all dimensions of the lot and structures, all easements, buffers, wetlands or restricted areas and all streets and waterways. The Municipal Engineer may require additional information.

Please amend your application and submit the required information to Lisa Rose Tavalacqua, Zoning Permit Clerk. Ms Tavalacqua can be reached at 732-262-1046 for further information. We will then be able to review your application.

Very Truly Yours,

Kate MacDonald

Kate MacDonald
Assistant Zoning Officer

C: Scott R. MacFadden, Business Administrator
Michael P. Fowler, Principal Planner

Department of Administration & Finance
Division of Land Use and Planning

Sean Kinney
Zoning Officer
(732) 262-1041
skinn@twp.brick.nj.us

Kate MacDonald
Asst. Zoning Officer
(732) 262-1043
Fax: (732) 262-8954
kmacdon@twp.brick.nj.us
http://www.twp.brick.nj.us

Resubmit
5/2/06 *KB*

Header - 732-292-2920

*1) Start park runabout? Walter's
same first part?*
*2) surveyor to do setbacks -
20' rear R10*
4/2/06 - 1st survey sent to #10

Applicable to Ordinance 720-92

This form must be handed in with permit application or a permit will not be issued

TOWNSHIP OF BRICK

Debris Form

Work Site Address: 436 The Esplanade, Bricktown, NJ

Block: 958.21 Lot: 15, 16, 417

Contractor: Beach Craft Builders

Contractor's Address: PO Box 455 Allenwood, NJ 08720

Type of Construction (minor, new home): add 2nd level.

Type of Debris (shingles, siding, wood, etc.): wood Frame, Roof + Vinyl Siding

Party responsible for removal: Beach Craft Construction / Grand Hawk

Dumpster size: VARIOUS

Destination of debris: OCLF.

Any recyclable material must be delivered to an approved recycling center and receipts provided to the Building Department along with tipping receipts for non-recyclable.

Generator's Certification: Under penalty of criminal and civil prosecution for the making or submission of false statements, representations or omissions, I declare, on behalf of the generator that the contents of this document are fully and accurately described above and have been disposed of in accordance with all applicable State and Federal laws and regulations, and that I have been authorized in writing, to make such declaration by the person in charge of the generator's operation.

Signature

Date

Print Name