BLOCK 358.21 LOT 15 QUALIFICATION CODE _____ ADDRESS (SITE) 436 The Esplanade PERMIT NO. 101540

CANCELLED 6/15/12

CONSTRUCTION PERMIT APPLICATION C-10-002049

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

I. IDENTIFICATION

1. Proposed Work Site at: 436 The Esplanade Brick, NJ 08724
2. Name [redacted] Batich
   Tel. [redacted] e-mail _____
   Address 436 The Esplanade (street) Brick, NJ. (municipality) 08724 (zip code)
3. Ownership in Fee: Public X Private _____
4. Principal Contractor: Belmar Plumbing & Heating Tel. (732) 292-9700
   Address 608 6th ave e-mail belmarplumbing@yahoo
   Belmar 07719
   License No. OR, If new home, Builder Reg. No. 12690 Exp. Date 06/30/11
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. 26-0275968 FAX: ( ) _____
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. ( ) _____ FAX: ( ) _____
6. Responsible Person in Charge once Work has Begun _____
   Tel. ( ) _____ FAX: ( ) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical	40		
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee			
10. Subtotal	$ 2		
11. Cert. of Occupancy	42		
12. Other			
13. TOTAL	$		

VI. BUILDING/SITE CHARACTERISTICS

		(office use only)
1. Number of Stories		
2. Height of Structure	ft.	
3. Area — Largest Floor	sq. ft.	
4. New Building Area	sq. ft.	
5. Volume of New Structure	cu. ft.	
6. Max. Live Load		
7. Max. Occupancy Load		
8. If Industrialized Building: State Approved ____ HUD ____		
9. Total Land Area Disturbed	sq. ft.	
10. Flood Hazard Zone		
11. Base Flood Elevation	ft.	
12. Wetlands yes ____ no ____		

IIa. PROPOSED WORK

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

IIb. SUBCODES (Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building									
☐ Electrical									
☐ Plumbing					6-15-12	BJ			
☐ Fire Protection									
☐ Elevator									
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   Gained, Sale ____ ____
   Gained, Rental ____ ____
   Lost, Sale ____ ____
   Lost, Rental ____ ____

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use:
2. Use Group, Proposed: _____
3. Change in Use Group, Indicate Present:

C. MIXED USE -List secondary use(s): _____

D. Construct. Classification: Present _____
Proposed _____

III. PLAN REVIEW (optional)

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

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

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

FOR OFFICE USE ONLY

Constituent Contact Report

Date	Comments	Initials

□ Zoning Application deemed complete Initialed: _____ Date: _____

□ Zoning Application approved Initialed: _____ Date: _____

□ Zoning permit updates:

_____

_____

_____

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.ix.

I personally prepared the plans submitted for: 1) the new home referred to in A.; or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

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

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

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

Signature _____ Date _____

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

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

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

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

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

(X) Check if contractor.

Agent Name Belmar P+H

Address 608 6th ave

Belmar NJ 07719

Telephone (732) 292-9200

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			X	X	X	X	X	X	
☐ Planning Board							X	X	
☐ Zoning Board			X	X	X	X	X	X	
☐ Sewer Authority							X	X	
☐ Water Authority							X	X	
☐ Police Department			X	X	X	X	X	X	
☐ Health Department					X	X			
☐ Soil Conservation							X	X	
☐ N.J. Department of Community Affairs	X	X	X	X	X	X			
☐ N.J. Department of Transportation	X	X	X	X	X	X			
☐ N.J. Department of Environmental Protection	X	X	X	X	X	X			
☐ Utility Dig No.			X	X	X	X	X	X	
☐									
☐									

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

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

X. CERTIFICATES ISSUED (office use only)

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 05/27/2011
Control Number C-10-002049
Permit Number 10-1540
Permit Issue Date 06/17/2010
Certificate Number 10-1540

Certificate

Construction Code Division

(Certificate of Approval)

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 Belmar Plumbing and Heating

Address 608 6th Avenue Belmar NJ 07719

Telephone: (732) 292-9700 Fax:

License Number or Builders Registration Number: 12690 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/Use: GAS LINE FOR POOL HEATER Pool Heater

Certificate Comments:

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

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

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

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

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

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

☐ **Certificate of Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

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

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

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

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 05/27/2011 U.C.C. F260 (rev. 08/05)

CONSTRUCTION PERMIT

Date Issued 6/17/10
Control # 610-002049
Permit # 10-1540

IDENTIFICATION Block: 958.21 Lot 15 Qualifier
Work Site Location: 436 THE ESPLANADE Brick Township, NJ
Owner in Fee: BATICH, STEPHEN J. & RITA T.
436 THE ESPLANADE BRICK NJ 08724
Telephone:

Contractor: Belmar Plumbing and Heating
Address: 608 6th Avenue Belmar NJ 07719
Telephone: (732) 292-9700
Lic. No. or Bldrs. Reg. No. 12690
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:
GAS LINE FOR POOL HEATER Pool Heater

Note: If constuction 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 $900

Construction Official

6-17-10
Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$40
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$2
CO Fee	
Other	$0
Total	$42
Check No.	154
Cash	$0
Credit	$0
Collected By	

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 Coce.

06/17/10 12:45PM 0015508811
[illegible] 001

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.

PLUMBING $40.00
DCA $2.00
$42.00

☐ 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, inspection 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.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control # 10-1540
Date Issued
Permit # 6/17/10

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 08724

Owner in Fee: Stephen Batich

Tel. (732) 899-1796 e-mail ______

Address 436 The Esplanade (street) Brick (municipality) 08724 (zip code)

Contractor: Belmar Plumbing and Heating LLC Tel (732) 292-9700

Address 608 6th ave e-mail belmarpandh@yahoo
Belmar 07719

Contractor License No. 12690 Exp. Date 06/11

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

Federal Emp. ID No. 26-0275968 FAX: (____) ______

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 $ 900

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL for PERMIT
Date: 6-15-10
Approved by: [signature]

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date: 5-26-11
Approved by: [signature]

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
~~Gas Equipment~~			4/26/11	[initials]
Gas Piping			10/19/10	[initials] Partial
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			5/26/11	[initials]

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

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Natural gas pool heater.

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

① ~~appliance Pool Heater~~ SA 4/11 Gas Piping update

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

U.C.C. F130 (rev. 12/07) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

10/19/10 - mB

① OUTSIDE ONLY - PRAIRIE (UNDERGROUND)

4/28/11 - mA

① TENSION OK.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control # 1010-1540
Date Issued
Permit # 6/17/10

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. 08724

Owner [redacted] Richard Natich

Tel. ([redacted]) e-mail

Address 436 The Esplanade Brick 08724

Contractor: Belmar Plumbing Heating LLC Tel. (732) 295-9700

Address 608 6th Ave Belmar 07719 e-mail belmarplumbing@yahoo.com

Contractor License No. 12698 Exp. Date 06/30/11

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

Federal Emp. ID No. 26-0275968 FAX: ( )

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 $ 900.-

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL for PERMIT
Date: 6-15-10
Approved by: BV

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

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

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Natural gas pool heater

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control # 10-10-1540

Date Issued
Permit # 6/17/10

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

Block 952.34 Lot 15 Qualification Code

Work Site Location [illegible]

Owner in Fee:

Tel. ([redacted]) e-mail

Address [illegible]

Contractor: Belmar Plbg LLC Tel. (732) 295 9700

Address [illegible] e-mail

Contractor License No. 12698 Exp. Date 08/11

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

Federal Emp. ID No. 26-0759458 FAX: ( )

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 $ 900-

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[ ] Plumbing Plans Approved
Date: Approved by:

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

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

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

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

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Natural gas pool heater

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

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

Total BTU 250,000

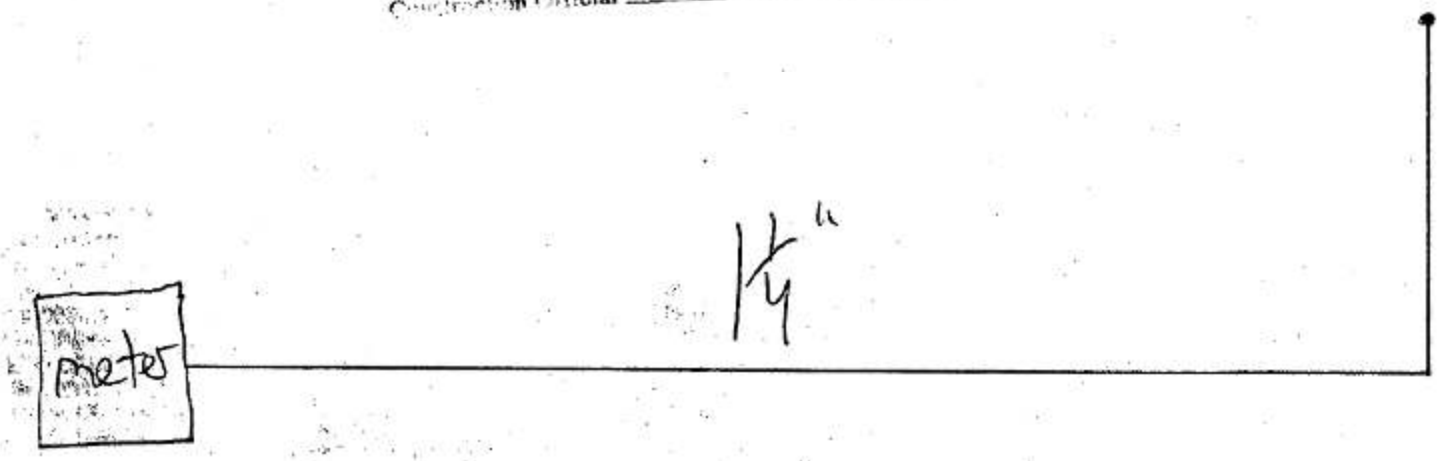
Total Run 87'

1¼ @ 90' = 320,000 BTU

TOWNSHIP OF BRICK

RELEASED FOR PERMIT	INITIAL	DATE
Building Subcode	BV	6-15-10
Plumbing Subcode		
Fire Subcode		
Electrical Subcode		
Plan Reviewer		
Plans Released		
Construction Official		

Pool Heater
250,000 BTU



436 The Esplanade

Total BTU 250,000

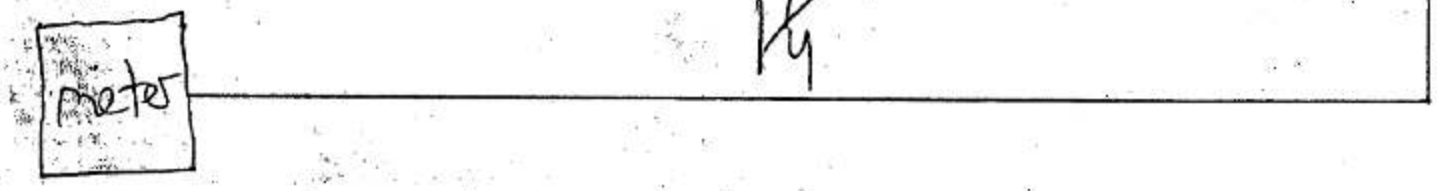
Total Run 87'

1½ @ 90' = 320,000 BTU

TOWNSHIP OF BRICK

RELEASED FOR PERMIT	INITIAL	DATE
Building Subcode		
Plumbing Subcode	JD	6-15-10
Fire Subcode		
Electrical Subcode		
Plan Reviewer		
Plans Released		
Construction Official		

Pool Heater
250,000 BTU

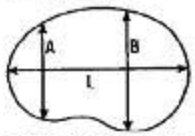


436 The Esplanade

Selecting the correct size H-Series heater

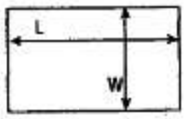
For Your Swimming Pool

Determine your pool's surface area in square feet:



Area = (A+B) x L x .45

Area = R x R x 3.14



Area = L x W

MODEL	SURFACE AREA
H400	1,200
H350	1,050
H300	900
H250	750
H200	600
H150	450

In this table, locate the surface area that is equal to or just greater than the pool's surface area. To the left of this number is the appropriate H-Series model that will fit the selected area.

For indoor pool installations, divide the pool's surface area by 3.

Table is based on a 30°F temperature rise, 3½ mph average wind velocity and elevation of up to 2,000 feet above sea level.

For Your Spa or Hot Tub

Determine your spa capacity in gallons (surface area x average depth x 7½).

The reference table lists the time required in minutes to raise the temperature of the spa/hot tub by 30°F. In the table below, locate the column with the spa/tub size in gallons that is closest to yours. Select the desired time to raise the spa/hot tub temperature 30°F, read to the left and select the appropriate H-Series model.

This guide can be adjusted for other temperature rises. For example, if you desire a 15°F increase in temperature, simply divide the time for 30°F rise by the ratio of 30/15, or 2.

Note: Heat lost and/or heat absorbed by spa walls or other objects will add to the time it takes the spa to heat up.

Spa sizing is based on an insulated and covered spa. Always cover your spa or hot tub when not in use to minimize heat loss and evaporation.

	SPA/TUB SIZE IN GALLONS								
	200	300	400	500	600	700	800	900	1,000
MODEL	Time in Minutes to Raise Spa/Tub Temperature 30°F								
H400	9	14	19	23	28	33	37	42	47
H350	11	16	21	27	32	37	43	48	54
H300	1	19	25	31	37	44	50	56	62
H250	15	22	30	37	45	52	60	67	75
H200	19	28	37	47	56	66	75	84	94
H150	25	37	50	62	75	87	100	112	125

Specifications and Dimensions

Universal H-Series Heater

	H400FD	H350FD	H300FD
BTU/Hr.	400,000	350,000	250,000
Width	36"	33"	28"
Depth	29½"	29½"	29½"
Height	24"	24"	24"
Water Connections	2" x 2½"	2" x 2½"	2" x 2½"
Flue Outlet Diameter	8"	8"	7"
Flue Pipe Diameter	9"	9"	7"
CVS Stack Height	36¾"	36¾"	33¾"
Heater Weight (lbs.)	160	158	134
Gas Connection at Heater	¾"	¾"	¾"

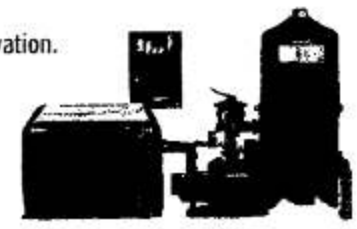
Electronic and Millivolt Heaters

	H400	H350	H300	H250	H200	H150
BTU/Hr.	400,000	350,000	300,000	250,000	200,000	150,000
Width	35¼"	32½"	29¾"	27"	24½"	21½"
Depth	27½"	27½"	27½"	27½"	27½"	27½"
Height	28½"	28½"	28½"	28½"	28½"	28½"
Water Connections	1½" x 2"	1½" x 2"	1½" x 2"	1½" x 2"	1½" x 2"	1½" x 2"
Flue Outlet Diameter	9"	9"	8"	7"	7"	6"
Flue Pipe Diameter	10"	10"	9"	7"	7"	6"
CVS Stack Height	19½"	17½"	17¼"	17¼"	15¼"	14"
Heater Weight (lbs.)	200	185	157	144	141	131
Gas Connection at Heater	¾"	¾"	¾"	¾"	¾"	¾"

H-Series heaters are available in a comprehensive range of BTU sizes for natural or propane gas. All units are certified by the Canadian Standards Association and carry Hayward's exclusive warranty.

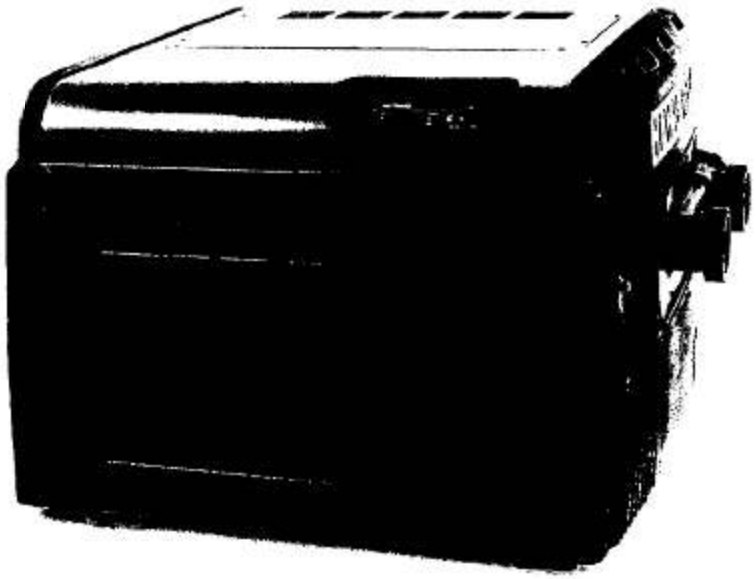
Efficiency. Performance. Innovation.

For pure comfort in ideal water temperatures, count on the control and efficiency of H-Series heaters – the perfect high-quality addition to your Totally Hayward® System.



H-SERIES POOL AND SPA HEATERS

HAYWARD Pool Products
One source. Every pool



Right for so many reasons.
Perfect for so many applications.

Pump

Filter

Heater

Heat Pump

Cleaner

Lightin

Control

Electronic Chlorin
Generator

CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

New Jersey Office of the Attorney General

Division of Consumer Affairs
State Board of Examiners of Master Plumbers
124 Halsey Street, 6th Floor, Newark, NJ 07102

PAULA T. DOW
Attorney General

SHARON M. JOYCE
Acting Director

Mailing Address:
P.O. Box 45008
Newark, NJ 07101
(973) 504-6420

March 17, 2010

TO WHOM IT MAY CONCERN

Our records indicate that Donald G. Baldwin, License # 12690, has applied to the Board for a seal press which has not yet been issued to him by the vendor.

Please accept this letter as an interim device pending the furnishing of a seal press to:

Donald G. Baldwin
608 6th Avenue
Belmar, NJ 07719

This letter will be rendered invalid 140 days after the date of its issuance.

STATE BOARD OF EXAMINERS
OF MASTER PLUMBERS

Rosemarie S. Baccile, Executive Assistant

RB:ls