

BLOCK 1422-19 LOT 17 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 18-0844



CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII C-13-005867

I. IDENTIFICATION

1. Proposed Work Site at: 725 Paramount Way Brick
2. Name of Owner in Fee: Robert Russo Te [REDACTED]
Address 725 Paramount Way street municipality
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: Dwight Refrigerate Tel. (732) 674-8585
Address 159 Manasid Dr. Brick
License No. OR, if new home, Builder Reg. No. 13VH07083600 Exp. Date _____
Federal Employee No. _____ FAX: () _____
5. Architect or Engineer _____ Tel. () _____
Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun _____
Tel. () _____ FAX: () _____

V. FEE SUMMARY (for office use only)

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

VI. BUILDING/SITE CHARACTERISTICS

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. 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)

OPTIONAL (for office use only)

II. PROPOSED WORK	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	Re-viewer
1. ☐ Minor Work							Approval	Rejection
2. ☐ New Building								
3. ☐ Addition								
4. ☐ a. Repair								
☐ b. Alteration								
☐ c. Renovation								
☐ d. Reconstruction								
5. ☐ Fire Protection								
6. ☐ Plumbing								
7. ☐ Electrical								
8. ☐ Elevator Devices								
9. ☐ Asbestos Abat. Subch. 8								
10. ☐ Lead Hazard Abatement								
11. ☐ Demolition								
TOTAL COSTS								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. State Specific Use: _____
2. Use Group: _____
3. Change in Use Group, Indicate Former: _____
4. No. of dwelling units: All Units Income-restricted
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: _____

III. DO YOU WANT: (optional)

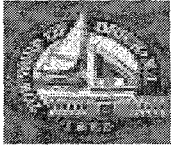
1. ☐ Partial Releases
2. ☐ Prototype Processing

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

10-15-13P01:16 FILE

P



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 4/13/2018
Control Number C-13-005867
Permit Number 18-0844
Permit Issue Date 4/2/2018
Certificate Number 18-0844

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 725 PARAMOUNT WAY Brick Township, NJ Block: 1422.19 Lot: 17 Qual: _____
Owner in Fee: RUSSO, ROBERT S & ROXANNA J
Owner Address: 725 PARAMOUNT WAY BRICK NJ 08724
Telephone: [REDACTED]
Contractor WT MECHANICAL
Address 112 ORION DRIVE BRICK NJ 08724
Telephone: (732) 232-4593 Fax: _____
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/Use: _____

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

Date Printed: 4/13/2018

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

Fee: \$0.00

Check Number: _____

Collected By: _____

Page 1

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. 5:23-2.15(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.

☐ Check if contractor.

Agent Name Ed Dwyer

Address 159 Marshside Dr. Brick NJ

Telephone (732) 674-8585

Signature Ed Dwyer

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



PLUMBING 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 1422.19 1st 17 Qualification Code 725
Work Site Location 725 Preumont Way

Owner Colonial USSO

Tel. [redacted] e-mail [redacted]

Address 725 Preumont Way Municipality Irvington Tel. (732) 903-7344 Zip code 07033

Contractor IRT Mechanical LLC Tel. (732) 903-7344

Address 112 Orion Dr. e-mail [redacted]

Contractor License No. 12334 Exp. Date 4-30-2013

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

Federal Emp. ID No. [redacted] FAX: ([redacted])

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed [redacted]

Building Sewer Size [redacted] Public Sewer [redacted] Private Septic [redacted]

Water Service Size [redacted] Public Water [redacted] Private Well [redacted]

Est. Cost of Plumbing Work \$ 1800

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

☐ Partial - Underslab Utilities Approved

Date: 10-22-13 Approved by: [signature]

☒ Plumbing Plans Approved

Date: 10-22-13 Approved by: [signature]

Joint Plan Review Required: [redacted]

☐ Bldg. ☐ Elec. ☐ Fire. ☐ Elev.

SUBCODE APPROVAL FOR PERMIT

Date: 10-22-13

Approved by: [signature]

SUBCODE APPROVAL FOR CERTIFICATE

☐ CO ☐ CCO ☐ CA

Date: 4-10-18

Approved by: [signature]

Date Received 4/2/18
Contract # 18-0844
Date Issued 4/2/18
Permit # 18-0844

C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Applicant Sign/Contractor [signature]

Print name here: Walter T. [redacted]

☒ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK Water heater

QTY. 1

FIXTURE/EQUIPMENT

Water Closet [redacted]

Urinal/Bidet [redacted]

Bath Tub [redacted]

Lavatory [redacted]

Shower [redacted]

Floor Drain [redacted]

Sink [redacted]

Dishwasher [redacted]

Drinking Fountain [redacted]

Washing Machine [redacted]

Hose Bibb [redacted]

Water Heater [redacted]

Fuel Oil Piping [redacted]

Gas Piping [redacted]

LP Gas Tank [redacted]

Steam Boiler [redacted]

Hot Water Boiler [redacted]

Sewer Pump [redacted]

Interceptor/Separator [redacted]

Backflow Preventer [redacted]

Greasetrapp [redacted]

Sewer Connection [redacted]

Water Service Connection [redacted]

Stacks [redacted]

Other [redacted]



CONSTRUCTION PERMIT

Date Issued _____
Control # C-13-005867
Permit # _____

IDENTIFICATION Block: 1422.19 Lot: 17 Qualifier _____
Work Site Location: 725 PARAMOUNT WAY Brick Township, NJ Contractor: WT MECHANICAL
Address: 112 ORION DRIVE BRICK NJ 08724
Owner in Fee: RUSSO, ROBERT S & ROXANNA J
725 PARAMOUNT WAY BRICK NJ 08724 Telephone: (732) 232-4593
Lic. No. or Bldrs. Reg. No. 12334
Federal Employee. No. _____
Telephone: _____

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

Hot Water Heater

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

Estimated Cost of Work \$1,800

Daniel P. Newman Jr.
Construction Official

Date _____

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$0
Plumbing	\$60
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$3
CO Fee	
Other	\$0
Total	\$63
Check No.	
Cash	\$0
Credit	\$0
Collected By	

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.

TOWNSHIP OF BRICK

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

John G. Ducey, Mayor

Township Council:

Heather deJong - President
Lisa Crate - Vice President
Jim Fozman
Arthur Halloran
Paul Mummolo
Marianna Pontoriero
Andrea Zapcic



Division of Inspections

Daniel Newman Jr.
Construction Official
dnewman@twp.brick.nj.us

732-262-1030
Fax: 732-262-2941
www.twp.brick.nj.us

March 27, 2018

Robert & Roxanna Russo
725 Paramount Way
Brick NJ 08724

Re: 725 PARAMOUNT WAY

Dear Homeowner:

Please be advised that a recent review of our files has found that you have a permit application that is ready for pick-up for: WATER HEATER . The total amount due is \$63

Please advise this office within the next fourteen (14) business days of your intent in regard to this permit application. If your intent is to not do the work, please provide this office with written confirmation of this.

You are required to obtain the required permits according to NJAC 5:23-2.14(a). Failure to do so is subject to penalties up to \$2000 per week as per NJAC 5:23-2.31(b).

Should you have any questions regarding the above, please contact Allison Peltier at 732-262-1030 ext. 1329.

Thank you for your prompt attention to this matter.

Sincerely,

Daniel F. Newman, Jr.
Construction Official

DFN/erp



www.facebook.com/BrickTwpNJGovernment



@TownshipofBrick



CHIMNEY VERIFICATION FOR REPLACEMENT OF FUEL-FIRED EQUIPMENT

BLOCK 422.19 LOT 17 QUALIFICATION CODE _____ PERMIT # _____
WORK SITE ADDRESS 725 Paramount Way BRICK
Owner in Fee Robert Russo
Verifying Individual Ed Dwyer Company Dwyer Refrigeration
Address 159 Mansside Dr BRICK NJ
Tel: (732) 674 8585 Fax: () _____

Check the Appropriate Box(es):

Type of Replacement:

- ☐ Oil to Gas Conversion
☐ Gas to Oil Conversion
☐ Gas Appliance Replacement
☐ Oil to Oil Replacement
☐ Other _____

Existing Vent/Chimney:

- ☐ "B" Label Vent
☐ "L" Label Vent
☐ Flexible Liner
☐ Power Vent/Exhauster

- ☐ Chimney-Interior
☐ Chimney-Exterior
☐ Masonry Chimney-Tile Lined
☐ Masonry Chimney-Unlined
☐ Other _____

Type new Fuel Type Gas BTU Rating (input/hour) 50,000
Appliance 1: _____ Oil / Gas / Other: _____
Appliance 2: _____ Oil / Gas / Other: _____
Appliance 3: _____ Oil / Gas / Other: _____

CHIMNEY LINER

If a chimney liner is being installed, all documentation on the liner must accompany the Permit application.

Manufacturer: _____ Model: _____ UL Listing: _____

Material of Liner: Stainless Steel _____ Aluminum _____

Size of Appliance Vent: _____ Size of Liner: _____ Height of Chimney: _____

Length of Connector: _____ Vent Connector Rise: _____

How does the appliance vent? ☐ Natural Draft ☐ Fan-assisted ☐ Other: _____

PLEASE SIGN ONE OF THE FOLLOWING VERIFICATION STATEMENTS

For Oil or Coal to Gas Conversions:

I have verified that the chimney/vent is in good repair and clear of obstruction and is substantially clean of residue from its previous use serving an oil or coal appliance. I have verified that the chimney/vent is appropriately lined and sized for the appliance(s) being installed.

Signature _____

Date _____

Oil to Oil or Gas to Gas Replacements or New/Additional Appliances:

I have verified that the existing chimney/vent is in good repair and clear of obstruction. I have verified that the existing chimney/vent is appropriately lined and sized for the appliance(s) being installed and/or remaining.

Signature _____

Date _____

Direct Vent Appliance:

I hereby verify that the appliance(s) being installed is a direct vent appliance. I further verify that the existing chimney/vent is appropriately lined and sized for any remaining appliances.

Signature Ed Dwyer

Date 10-15-13

Verification Not Submitted:

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

Signature _____

Date _____

FOR MINOR AND EMERGENCY WORK, THIS FORM MUST BE PROVIDED WITH YOUR PERMIT APPLICATION. FOR ALL OTHER WORK, THIS FORM MUST BE PRESENTED TO THE CODE OFFICIAL PRIOR TO FINAL INSPECTION.

All applicable information requested on this form must be supplied.

This form may not be submitted by a homeowner in lieu of the required inspection.

Residential Power Vent High EF Energy Saver Gas Water Heater

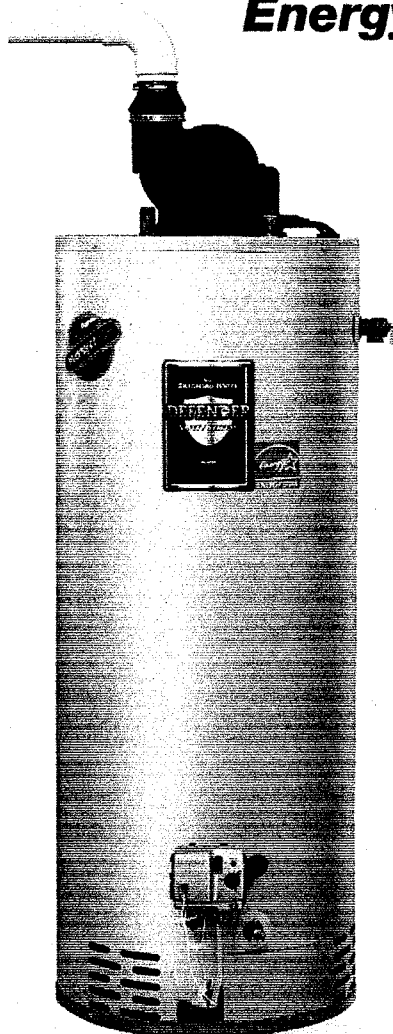


Photo is of
M-4-TW-40T6FBN

The TTW® High EF FVIR Defender Safety System® Models Feature:

- **ENERGY STAR® Qualified**—These models qualify for the September 1st, 2010 minimum ENERGY STAR® EF requirement, as well as most utility rebate programs.
- **Bradford White ICON System™**—Intelligent gas control with spark to pilot ignition system eliminates the constant burning pilot. This results in savings of pilot gas during stand by periods (120 V.A.C.).
 - **Enhanced Performance**—Proprietary algorithms provide enhanced First Hour Delivery ratings and tighter temperature differentials.
 - **Advanced Temperature Control System**—Microprocessor constantly monitors and controls burner operation to maintain consistent and accurate water temperature levels.
 - **Intelligent Diagnostics**—An exclusive green LED light prompts the installer during start-up and provides ten different diagnostic codes to assist in troubleshooting.
 - **Separate Immersed Thermowell**—High strength advanced polymer composite thermowell provides isolation between electric temperature sensor and surrounding water. No need to drain the tank when removing gas valve.
- **Compatible With Optional Accessory Packages**—Performance Package, Protection Package and Inlet Shut-Off Valve.
- **Power Vented Water Heater**—Designed for installations where atmospheric units cannot be used. Exhaust gases are vented under positive pressure directly out of the building through the roof or the wall.
- **Powerful Blower Motor**—Our significantly quiet design has greater resistance to outside winds and the power to vent in many difficult venting situations.
- **Horizontal and Vertical Venting**—With 2" or 3" PVC, ABS or CPVC (Maximum equivalent vent length on reverse side).
- **Advanced ScreenLok® Technology Flame Arrestor Design**—Flame arrestor is designed to prevent ignition of flammable vapor outside of the water heater.
- **Flammable Vapor Sensor**—Electronic sensor prevents burner operation if flammable vapors are detected. The sensor will also prevent operation if there is ongoing flammable vapor burn inside the combustion chamber.
- **Maintenance Free**—No regular cleaning of air inlet openings or flame arrestor is required under normal conditions.
- **Sight Window**—Offers a view into the combustion chamber to observe the operation of the pilot and burner.
- **Factory installed Hydrojet® Total Performance System**—Cold water inlet sediment reducing device helps prevent sediment build up in tank. This increases first hour delivery, while minimizing temperature build up at top of tank.
- **Vitraglas® Lining**—Bradford White tanks are lined with an exclusively engineered enamel formula that provides superior tank protection from the highly corrosive effects of hot water. This formula (Vitraglas®) is fused to the steel surface by firing at a temperature of over 1600°F (871°C).
- **2" Non-CFC Foam Insulation**—Covers the sides and top, reducing the amount of heat loss. This results in less energy consumption, improved operation efficiencies and jacket rigidity.
- **Pedestal Base.**
- **Water Connections**—3/4" NPT factory installed true dielectric fittings.
- **Factory installed Heat Traps**—Design incorporates a flexible disk that reduces heat loss in piping and eliminates the potential for noise generation.
- **Protective Magnesium Rod.**
- **T&P Relief Valve**—Included.
- **Low Restriction Brass Drain Valve**—Durable tamper proof design.

FEATURING:



6 or 10-Year Limited Tank Warranties / 6 or 10-Year Limited Warranty on Component Parts.

For more information on warranty, please visit www.bradfordwhite.com

For products installed in USA, Canada and Puerto Rico. Some states do not allow limitations on warranties. See complete copy of the warranty included with the heater.

MANUFACTURED UNDER ONE OR MORE OF THE FOLLOWING U.S. PATENTS: 5,954,492; 5,761,379; 5,943,984; 5,081,696; 5,988,117; 6,142,216; 5,199,385; 5,574,822; 5,372,185; 5,485,879; 5,277,171; (B1)5,341,770; 5,660,165; 5,596,952; 5,682,666; 4,904,428; 5,023,031; 5,000,893; 4,669,448; 4,829,983; 4,808,356; 5,115,767; 5,092,519; 5,052,346; 4,416,222; 4,628,184; 4,861,968; 4,672,919; Re. 34,534; 7,270,087 B2. OTHER U.S. AND FOREIGN PATENT APPLICATIONS PENDING. CURRENT CANADIAN PATENTS: 1,272,914; 1,280,043; 1,289,832; 2,045,862; 2,112,515; 2,108,186; 2,107,012; 2,092,105; 2,409,271. Defender Safety System®, ScreenLok®, TTW®, Vitraglas® and Hydrojet® are registered trademarks of Bradford White® Corporation.

Residential Power Vent Gas Water Heater

TTW® High EF Energy Saver Models

NATURAL GAS AND LIQUID PROPANE GAS

Meet or exceed ASHRAE 90.1b (current standard) C.E.C. Listed
80% Recovery Efficiency

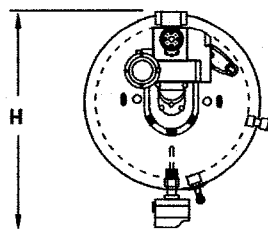
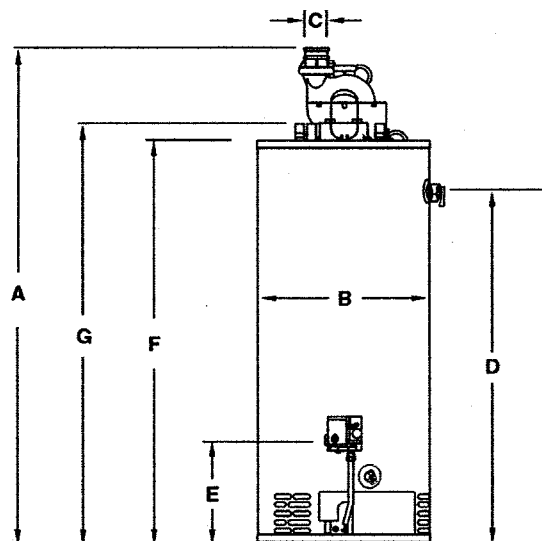
Model Number	Capacity		Nat. BTU/Hr. Input	LP BTU/Hr. Input	Recovery 90°F Rise*				A Floor to Vent Conn.	B Jacket Dia.	C Vent Size	D Floor to T&P Conn.	E Floor to Gas Conn.	F Floor to Top of Heater	G Floor to Water Conn.	H Depth	Approx. Shipping Weight
	U.S. Gal.	Imp. Gal.			Nat. U.S. GPH	Nat. Imp. GPH	LP U.S. GPH	LP Imp. GPH	in.	in.	in.	in.	in.	in.	in.	in.	lbs.
M-4-TW40TGFBN	40	33	40,000	38,000	43	36	41	34	67	20	2	50	11¼	56¼	57¼	24¼	152
M-4-TW50TGFBN	50	42	40,000	38,000	43	36	41	34	67	22	2	50	11¼	57	58	26¼	175
M-4-TW60TGFBN	60	51	40,000	38,000	43	36	41	34	68	24	2	50½	11¼	57¼	58¼	28¼	210

Model Number	Capacity		Nat. kW Input	LP kW Input	Recovery 50°C Rise*				A Floor to Vent Conn.	B Jacket Dia.	C Vent Size	D Floor to T&P Conn.	E Floor to Gas Conn.	F Floor to Top of Heater	G Floor to Water Conn.	H Depth	Approx. Shipping Weight
	Liters				Nat. Liters/Hour	Nat. Imp. Liters/Hour	LP Liters/Hour		mm.	mm.	mm.	mm.	mm.	mm.	mm.	mm.	kg.
M-4-TW40TGFBN	151		11.7	11.0	163		155		1702	508	51	1270	298	1441	1467	632	69
M-4-TW50TGFBN	190		11.7	11.0	163		155		1702	559	51	1270	298	1448	1473	679	80
M-4-TW60TGFBN	227		11.7	11.0	163		155		1727	610	51	1283	298	1467	1492	730	96

Propane models feature a Titanium Stainless Steel propane burner. For Propane (LP) models change suffix "BN" to "SX".
For 10 year models, change suffix from "6" to "10".

*Based on manufacturer's rated recovery efficiency.

110 V.A.C. Required for Power Venting / 110 V.A.C., 60HZ, 3.1 Amperes



M-4-TW40 M-4-TW50 M-4-TW60	2" Vent Pipe	3" Vent Pipe
Max. Equivalent Length	†50 ft.	†120 ft.
Min. Equivalent Length	7 ft.	15 ft.
Number of 90° Elbows	1 45 ft. 2 40 ft. 3 35 ft.	115 ft. 110 ft. 105 ft.

†For high altitude installations, consult the installation instructions.

General

All gas water heaters are certified at 300 PSI (2068 kPa) test pressure and 150 PSI (1034 kPa) working pressure.

All water connections are 3/4" NPT (19mm) on 8" (203mm) centers, all gas connections are 1/2" (13mm).

All models design certified by CSA International (formerly AGA/CGA), ANSI Z-21.10.1 and peak performance rated.

Dimensions and specifications subject to change without notice in accordance with our policy of continuous product improvement.

Suitable for Water (Potable) Heating and Space Heating.

Toxic chemicals, such as those used for boiler treatment, shall NEVER be introduced into this system. This unit may NEVER be connected to any existing heating system or component(s) previously used with a non-potable water heating appliance.



For U.S. and Canada field service, contact your professional installer or local Bradford White sales representative.

Sales 800-523-2931 • Fax 215-641-1670 / Technical Support 800-334-3393 • Fax 269-795-1089 • Warranty 800-531-2111 • Fax 269-795-1089

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