BLOCK 1385.07 LOT 9 QUALIFICATION CODE _____ ADDRESS (SITE) 636 Winding River PERMIT NO. 10-1142

CONSTRUCTION PERMIT APPLICATION C10-001322

RECD APR 29 2010

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

I. IDENTIFICATION

1. Proposed work Site at: 636 Winding River Road
2. Name of Owner in Fee: Troncone Te [redacted]
   Address Same (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: AJ Perri Tel. (732) 982-8700
   Address 1138 Pine Brook Road, Tinton Falls, NJ 07724
   License No. or, if new home, Builder Reg. No. 13VH00346300 Exp. Date _____
   Federal Employee No. 36-427609-7 Fax (732) 982-8715
5. Architect or Engineer: _____ Tel. (_____) _____
   Address _____ Contact: _____
6. Responsible Person in Charge once Work has Begun: Louis Malvasi
   Tel. (_____) _____ Fax (_____) _____

Sewer Service
Public _____
Private _____

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		1	
8. Subtotal	$		
9. State Permit Surcharge Fee			
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other		41-	
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. 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	

II. PROPOSED WORK

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 Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☐ a. Repair									
☐ b. Alteration									
☐ c. Renovation									
☐ d. Reconstruction									
5. ☒ Fire Protection	980								
6. ☒ Plumbing	420				050610	PA			
7. ☐ Electrical									
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	1400								

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

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.

A.J. Perri
1138 Pine Brook Rd.
Tinton Falls, NJ 07724
1-800-287-2164
36-427609-7

Agent Name Louis Malvasi

Address _____

Telephone (____) _____

Signature _____

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 06/14/2010
Control Number C-10-001322
Permit Number 10-1142
Permit Issue Date 05/17/2010
Certificate Number 10-1142

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 636 WINDING RIVER RD. Brick Township, NJ Block: 1385.07 Lot: 9 Qual:

Owner in Fee: TRONCONE, MARK A & JENNIFER

Owner Address: 636 WINDING RIVER RD BRICK NJ 08724

Telephone: [redacted]

Contractor A J PERRI INC

Address 1138 PINE BROOK ROAD TINTON FALLS NJ 07724

Telephone: (732) 982-8700 Fax: (732) 982-8715

License Number or Builders Registration Number: 13296B 13VH00346300 Federal Emp. Number: 36-4726097

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: REPLACEMENT WATER HEATER REPLACE 50 GALLON WATER 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: 06/14/2010 U.C.C. F260 (rev. 08/05)

CONSTRUCTION PERMIT

Date Issued 5/17/10
Control # C-10-001370
Permit # 10-1143

IDENTIFICATION Block: 1067.04 Lot: 8 Qualifier

Work Site Location: 418 DRISCOL DR. Brick Township, NJ

Owner in Fee: WILSON, RANDALL G. & LUCILLE P.
418 DRISCOL DR. BRICK NJ 08724

Telephone: [redacted]

Contractor: MICHAEL J PERRI T/A AJ PERRI, INC
Address: 9 JOHNSON STREET MONMOUTH BEACH NJ 07750

Telephone: (732) 982-8700
Lic. No. or Bldrs. Reg. No. 12566
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
AIR CONDITIONER, DUCTWORK

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 $10,100

Construction Official

5-10 10
Date

PAYMENTS (Office Use Only)

Building	$40
Electrical	$40
Plumbing	$40
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$17
CO Fee	
Other	$0
Total	$137
Check No.	
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 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.

#1143
BUILDING $40.00
ELECTRIC $40.00
PLUMBING $40.00
DCA $17.00
TOTAL $137.00

- [ ] 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, 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.

CONSTRUCTION PERMIT

Date Issued 5/17/10
Control # C-10-001822
Permit # 10-1142

IDENTIFICATION Block: 1385.07 Lot: 9 Qualifier
Work Site Location: 636 WINDING RIVER RD. Brick Township, NJ
Owner in Fee TRONCONE, MARK A & JENNIFER
636 WINDING RIVER RD BRICK NJ 08724
Telephone: [redacted]

Contractor A J PERRI INC
Address 1138 PINE BROOK ROAD TINTON FALLS NJ 07724
Telephone: (732) 982-8700
Lic. No. or Bldrs. Reg. No. 13VH00346300
Federal Employee. No. 36-4726097

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:
REPLACEMENT WATER HEATER REPLACE 50 GALLON WATER 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 $420

Construction Official Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$40
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$1
CO Fee	
Other	$0
Total	$41
Check No.	
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 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.

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued

Permit #

IDENTIFICATION Block 1385.07 Lot 9 Qualification Code

Work Site Location 636 Winding River Rd Brick 08724

Owner in Fee Troncone

Address Same

Tel. ([redacted]

Contractor **A.J. Perri Inc.**

Address 1138 Pine Brook Road
Tinton Falls, NJ 07724

Tel. (732) 982-8700 Fax (732) 982-8715

Lic. No. or Bldrs. Reg. No. #03463

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK: Replace 50-gallon 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 $ 1,400.-

Construction Official

Date

PAYMENTS (Office Use Only)

Building
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA State Permit Fee
Cert. of Occupancy
Other
Total
Check No.
Cash
Collected by

U.C.C. F170 (rev. 01/04)

(see reverse side)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

AJ 036 Rev 11 06

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued

Permit #

IDENTIFICATION Block 1385.07 Lot 9 Qualification Code

Work Site Location 636 Winding River Rd Brick 08724

Owner in Fee Troncone

Address Same

Tel. [redacted]

Contractor **A.J. Perri Inc.**

Address 1138 Pine Brook Road
Tinton Falls, NJ 07724

Tel. (732) 982-8700 Fax (732) 982-8715

Lic. No. or Bldrs. Reg. No. #03463

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK: Replace old 50-gallon 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 $ 1,400.-

Construction Official

Date

PAYMENTS (Office Use Only)

Building
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA State Permit Fee
Cert. of Occupancy
Other
Total
Check No.
Cash
Collected by

U.C.C. F170 (rev. 01/04)

(see reverse side)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

AJ 036 Rev 11 06

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued

Permit #

IDENTIFICATION Block 1385.07 Lot 9 Qualification Code

Work Site Location 636 Winding River Rd Brick 08724

Owner in Fee Troncone

Address Same

Tel. ([redacted]

Contractor **A.J. Perri Inc.**

Address 1138 Pine Brook Road
Tinton Falls, NJ 07724

Tel. (732) 982-8700 Fax (732) 982-8715

Lic. No. or Bldrs. Reg. No. #03463

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK: Replace 50 gallon 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 $ 1,400.-

Construction Official

Date

PAYMENTS (Office Use Only)

Building
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA State Permit Fee
Cert. of Occupancy
Other
Total
Check No.
Cash
Collected by

U.C.C. F170 (rev. 01/04)

(see reverse side)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

AJ 036 Rev 11 06

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued

Permit #

IDENTIFICATION Block 1395.07 Lot 9 Qualification Code

Work Site Location 28 Winding River Rd
Toms River 08724

Owner in Fee Tenant

Address Same

Tel. ([redacted]

Contractor **A.J. Perri Inc.**

Address 1138 Pine Brook Road
Tinton Falls, NJ 07724

Tel. (732) 982-8700 Fax (732) 982-8715

Lic. No. or Bldrs. Reg. No. #03463

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK: Replace 50. gallon 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 $ 1,400.-

Construction Official

Date

PAYMENTS (Office Use Only)

Building
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA State Permit Fee
Cert. of Occupancy
Other
Total
Check No.
Cash
Collected by

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

AJ 036 Rev 11 06

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 10-1142

Date Issued / Permit # 5/17/10

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

Block 1385.07 Lot 9 Qualification Code

Work Site Location 636 Winding River Road Brick 08724

Owner in Fee Troncone

Address Same

[redacted]

Tel ([redacted]

Contractor MICHAEL J. PERRI T/A AJ PERRI, INC.

Address 9 JOHNSON STREET
MONMOUTH BEACH, NJ 07750

Tel (732) 982-8700 FAX (732) 982-8715

Contractor License No. 12566

Federal Emp. No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 420.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date: 05.06.10

Approved by: AA

SUBCODE APPROVAL 5-6-10 CJ

[ ] CO [ ] CCO [X] CA

Date: 6-8-10

Approved by: CJ

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			6/7/10	

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

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control # 10-1142

Date Issued
Permit # 5/17/10

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

Block 1385.07 Lot 9 Qualification Code _____

Work Site Location 636 Winding River Road
Brick 08724

Owner in Fee Troncone

Address Same

Tel [redacted]

Contractor MICHAEL J. PERRI T/A AJ PERRI, INC.

Address 9 JOHNSON STREET
MONMOUTH BEACH, NJ 07750

Tel (732) 982-8700 FAX (732) 982-8715

Contractor License No. 12566

Federal Emp. No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____

Building Sewer Size _____ Public Sewer _____ Private Septic _____

Water Service Size _____ Public Water _____ Private Well _____

Est. Cost of Plumbing Work $ 420.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date: 05/06/10

Approved by: PA

SUBCODE APPROVAL 5-6-10 EJ

[ ] CO [ ] CCO [ ] CA

Date: _____

Approved by: _____

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

C. CERTIFICATION IN LIEU OF OATH

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

_____

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

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

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

Administrative Surcharge $ _____

Minimum Fee $ _____

State Permit Surcharge Fee $ _____

TOTAL FEE $ _____

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

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

AJ 020 Rev 2 09

10-1142

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control # 10-1142

Date Issued
Permit # 5/17/10

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

Block 1745.07 Lot 9 Qualification Code _____

Work Site Location 436 Winding River Road
c.r.h 139724

Owner in Fee Trocone

Address Same

Tel [redacted]

Contractor MICHAEL J. PERRI T/A AJ PERRI, INC.

Address 9 JOHNSON STREET
MONMOUTH BEACH, NJ 07750

Tel (732) 982-8700 FAX (732) 982-8715

Contractor License No. 12566

Federal Emp. No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____

Building Sewer Size _____ Public Sewer _____ Private Septic _____

Water Service Size _____ Public Water _____ Private Well _____

Est. Cost of Plumbing Work $ 420.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date: 05/6/10

Approved by: PA

SUBCODE APPROVAL 5-6-10

[ ] CO [ ] CCO [ ] CA

Date: _____

Approved by: MICHAEL J. PERRI LICENSED PLUMBER 12566

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

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

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

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

Administrative Surcharge $ _____

Minimum Fee $ _____

State Permit Surcharge Fee $ _____

TOTAL FEE $ _____

A.J. PERRI, INC.

80254

DATE	INVOICE NO.	COMMENT	AMOUNT	DISCOUNT	NET AMOUNT
5/12/2010	R280192	Troncone	$41.00	$0.00	$41.00
5/12/2010	80254		$41.00	$0.00	$41.00
BRICK	Brick Township			**TOTAL**	

FIRE PROTECTION 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 1385.07 Lot 9
Work Site Location 636 Winding River Road
Brick 08724
Owner in Fee Troncone
Address Same
[redacted]
Tele. (2 [redacted]
Contractor **A.J. Perri, Inc.**
Address 1138 Pine Brook Road
Tinton Falls, NJ 07724
Tele. (732) 982-8700 Fax (732) 982-8715
Lic. No.
Federal Emp. No. 36-427609-7 or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present ______ Proposed ______
Constr. Class. Present ______ Proposed ______
Heating Systems [ ] New [X] Existing
Type: [X] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ 980.- [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Elec.
[ ] Fire Plans Approved
Date:
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS: Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
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.

Greg Johnston
SIGNATURE

D. TECHNICAL SITE DATA

Description of work

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity ______ Fuel ______
Combustible Liquid Storage Tanks ( ) Capacity ______ Fuel ______
L.P.G. Storage Tanks ( ) Capacity ______ Fuel ______
L.N.G. Storage Tanks ( ) Capacity ______ Fuel ______

NA Charged Under 1 G

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance	1	
OTHER		

Administrative Surcharge $
Paid [ ] Check # ______ Minimum Fee $
Collected by ______ TOTAL FEE $

U.C.C. Form F-140A
1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy
AJ 023 Rev 05 07

FIRE PROTECTION 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 1385.07 Lot 9
Work Site Location 636 Winding River Road
Brick 08724
Owner in Fee Troncone
Address Same
[redacted]
Tele. [redacted]
Contractor A.J. Perri, Inc.
Address 1138 Pine Brook Road
Tinton Falls, NJ 07724
Tele. (732) 982-8700 Fax (732) 982-8715
Lic. No.
Federal Emp. No. 36-427609-7 or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [X] Existing
Type: [X] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ 980.- [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Elec.
[ ] Fire Plans Approved
Date:
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
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.

Greg Johnston
SIGNATURE

D. TECHNICAL SITE DATA

Description of work

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
(Gas) or Oil Fired Appliance	1	
OTHER		

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by TOTAL FEE $

U.C.C. Form F-140A

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

AJ 023 Rev 05 07

CHIMNEY CERTIFICATION
FOR REPLACEMENT OF FUEL FIRED EQUIPMENT

BLOCK 1385.07 LOT 9 QUALIFICATION CODE _____ PERMIT # _____

WORK SITE ADDRESS 636 Winding River Road Brick 08724

Applicant Troncone

Certifying Individual Jim Henkel Company AJ Perri

Address 1138 Pine Brook Road (Street) Tinton Falls (City) NJ (State) 07724 (Zip Code)

Tel. (732) 982-8700

Check the Appropriate Box

Type of Replacement:

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

Existing Vent/Chimney:

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

PLEASE SIGN ONE OF THE FOLLOWING CERTIFICATION STATEMENTS

CERTIFICATION

For Oil to Gas Conversions:

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

_____ Signature _____ Date

Oil to Oil or Gas to Gas Replacements:

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

_____ Signature _____ Date

Certification Not Submitted:

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

_____ Signature _____ Date

Direct Vent Appliance:

No certification required:

_____ Signature _____ Date

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

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

M-I-5036FBN

BRADFORD WHITE® CORPORATION

"Highest in Subcontractor Satisfaction among Water Heater/Boiler Manufacturers"

Residential Energy Saver Gas-Upright

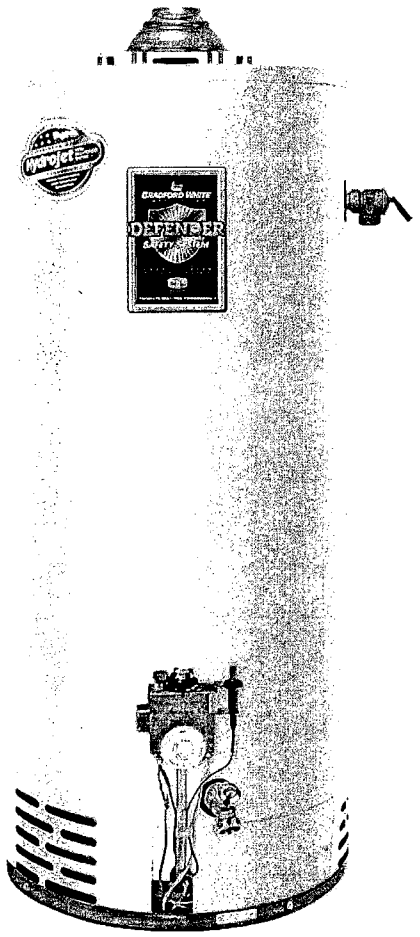


Photo is of
M-I-5036FBN

The Bradford White Defender Safety System® Models Feature (Except M-I-75S and M-I-100T):

- **Advanced ScreenLok® Technology Flame Arrestor Design**—Flame arrestor is designed to prevent ignition of flammable vapor outside of the water heater.
- **Resettable Thermal Switch**—Proven and reliable bimetallic switch prevents burner and pilot operation in case of ongoing flammable vapor burn inside of the combustion chamber or restricted air flow.
- **Piezo Igniter**—Easy and quick lighting of the pilot burner by push button.
- **Pedestal Base**—Rugged and durable base allows easy transport and positioning, while providing corrosion resistant contact with floor.
- **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.

All Energy Saver Upright Models Feature:

- **DOE**—All residential storage models meet or exceed efficiency requirements of the Department of Energy. ASHRAE Standard 90.1 b (current standard) and the National Appliance Energy Conservation Act of 1987 recent amendment effective January 20, 2004 which supercedes all state and local efficiency requirements.
- **Factory Installed Hydrojet® Total Performance System**—Cold water inlet sediment reducing device. Helps prevent sediment build up in tank. Increases first hour delivery of hot water while minimizing temperature build up at top of tank. (100 gallon models come equipped with the Hydrojet® Sediment Reduction System).
- **Fully Automatic Controls**—Automatic temperature selection at your fingertips. Built-in energy cut-off switch prevents abnormally high water temperature for extra safety. Built-in gas pressure regulation.
- **Vitraglas® Lining**—Bradford White water heater tanks are protected from the corrosive effects of hot water by an exclusive ceramic porcelain-like coating. The Bradford White high silica Vitraglas® lining provides a tough interior surface for our hot water tanks.
- **1" Non-CFC Foam Insulation**—Surrounds the tank surface, saving energy by retarding loss of heat (M-I-75 has 1 1/4" and M-I-100T has 2").
- **Flue Baffle**—Designed to maximize the amount of heat absorbed in the lower portion of tank. Minimizes air movement in the heater during standby periods to retard heat loss up the flue.
- **Protective Magnesium Anode Rod**—Provides added protection against corrosion for long trouble-free service.
- **Brass Drain Valve.**
- **3x4 "Snap Lock" Draft Diverter**—Allows either 3" or 4" vent connections with inputs of 40,000 BTU/Hr or less. Over 40,000 BTU/Hr has the 4" "Snap Lock" Draft Diverter.
- **T&P Relief Valve Included.**
- **Factory Installed Heat Traps**—Design incorporates a flexible disk that reduces heat loss in piping and eliminates the potential for noise generation (Except M-I-75S & M-I-100T).
- **Water Connections**—3/4" NPT factory installed true dielectric fittings. Extends water heater life and eases installation (M-I-75S has 1" NPT and M-I-100T has 1 1/4" NPT factory installed dielectric waterway fittings).
- **Steel Tank**—Heavy gauge steel automatically formed, rolled and welded to assure a continuous seam for glass lining.
- **Design Certified by CSA International (formerly AGA and CGA).**

EFFICIENCY RATING CERTIFIED ama

6 or 10-Year Limited Tank Warranties / 6-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.

Bradford White received the highest numerical score among water heater/boiler manufacturers in the proprietary J.D. Power and Associates/ McGraw-Hill Construction 2006 HVAC and Water Heater/Boiler Subcontractor Satisfaction Study℠. Study based on 882 responses measuring 3 water heater/boiler manufacturers and measures opinions of subcontractors. Proprietary study results are based on experiences and perceptions of subcontractors surveyed in May through July 2006. Your experiences may vary. Visit jdpower.com

Residential Energy Saver Gas-Upright

DEFENDER SAFETY SYSTEM®

Energy Saver Models

NATURAL GAS AND LIQUID PROPANE GAS

Meet or exceed ASHRAE 90.1b (current standard) C.E.C. Listed
Recovery efficiency ranging up to 78% (M-I-75S and M-I-100T have an 80% recovery efficiency)

Model Number	Capacity U.S. Gal.	Capacity Imp. Gal.	Nat. BTU/Hr. Input	LP BTU/Hr. Input	Recovery 90°F Rise* Nat. U.S. GPH	Nat. Imp. GPH	LP U.S. GPH	LP Imp. GPH	A Floor to Flue Conn. in.	B Jacket Dia. in.	C Vent Size in.	D Floor to T&P Conn. in.	E Floor to Gas Conn. in.	F Floor to Water Conn. in.	Approx. Shipping Weight lbs.
M-I-30T6FBN•	30	25	32,000	31,000	33	28	32	27	59⅛	16	3x4	49¾/56¾	13	57½	104
M-I-30S6FBN	30	25	30,000	26,000	31	26	27	23	48⅜	18	3x4	38¾	13	46¾	100
M-I-303T6FBN•	29	24	40,000	35,000	42	34	37	31	58	16	3x4	49¾ /55¾	13	56½	109
M-I-40T6FBN•	40	33	40,000	36,000	42	34	38	32	59⅜	18	3x4	50/56⅜	13	57¾	120
M-I-403S6FBN•	40	33	40,000	38,000	42	34	40	33	50	20	3x4	41/47¼	13	48½	128
M-I-404T6FBN•	40	33	50,000	48,000	53	44	50	42	60¾	18	4	51½/58	13	58½	127
M-I-5036FBN•	50	42	40,000	36,000	42	34	38	32	59⅜	20	3x4	50/57	13	58	145
M-I-50L6FBN	48	40	40,000	38,000	42	34	40	33	49¾	22	3x4	40½	13	48¾	153
M-I-504S6FBN•	50	42	50,000	48,000	53	44	50	42	58½	20	4	50/55¾	13	57	150
M-I-60T6FBN	60	50	40,000	38,000	42	34	40	33	60¾	22	3x4	50½	13	58¼	166
M-I-75S6BN	75	63	76,000	76,000	82	69	82	69	63¾	24½	4	53	16	61¼	264
M-I-100T6BN	100	83	85,000	88,000	92	77	95	80	68⅛	28¼	4	59⅜	15⅝	65⅛	420

Model Number	Capacity Liters	Nat. kW Input	LP kW Input	Recovery 50°C Rise* Nat. Liters/ Hour	LP Liters/ Hour	A Floor to Flue Conn. mm.	B Jacket Dia. mm.	C Vent Size mm.	D Floor to T&P Conn. mm.	E Floor to Gas Conn. mm.	F Floor to Water Conn. mm.	Approx. Shipping Weight kg.
M-I-30T6FBN•	114	9.4	9.1	125	121	1502	406	76x102	1264/1432	330	1461	47
M-I-30S6FBN	114	8.8	7.7	117	102	1229	457	76x102	9841	330	1187	45
M-I-303T6FBN•	110	11.7	10.3	159	140	1473	406	76x102	1264/1403	330	1435	49
M-I-40T6FBN•	151	11.7	10.6	155	140	1508	457	76x102	1270/1438	330	1467	54
M-I-403S6FBN•	151	11.7	11.1	155	148	1270	508	76x102	1041/1200	330	1232	58
M-I-404T6FBN•	151	14.7	14.1	201	189	1543	457	102	1308/1473	330	1486	58
M-I-5036FBN•	189	11.7	10.6	159	144	1514	508	76x102	1270/1445	330	1473	66
M-I-50L6FBN	182	11.7	11.1	159	151	1264	559	76x102	1029	330	1226	69
M-I-504S6FBN•	189	14.7	14.1	201	189	1486	508	102	1270/1416	330	1448	68
M-I-60T6FBN	227	11.7	11.1	163	151	1543	609	76x102	1282	330	1480	75
M-I-75S6BN	284	22.3	22.3	310	310	1619	622	102	1346	406	1518	120
M-I-100T6BN	379	24.9	25.7	348	359	1745	718	102	1507	397	1651	191

All propane heaters are equipped with a cast iron burner.
To order a propane heater change suffix "BN" to "CX".
For 10 year models, change suffix from "6" to "10".
*Based on manufacturers rated recovery efficiency.
Note: M-I-30S, M-I-50L, M-I-60T, M-I-75S and M-I-100T do not have top T&P option.
• Models feature optional top T&P location and must be specified when ordering.
M-I-100T models feature hand hole cleanout.
All natural gas models meet SCAQMD Requirements.
Meets NAECA Requirements

General

All gas water heaters are certified at 300 PSI test pressure (2068 kPa) and 150 PSI working pressure (1034 kPa). All water connections are 3/4" NPT (19mm) on 8" (203mm) centers. The 75 gallon model (284 liters) has 1" (25mm) NPT on 11" (279mm) centers and 100 gallon model (379 liters) has 1 1/4" (32mm) water connections on 16" (406mm) centers. All gas connections 1/2" (13mm).

All models design certified by CSA International (formerly AGA/CGA), ANSI standard Z-21.10.1 and or 10.3 and peak performance rated.

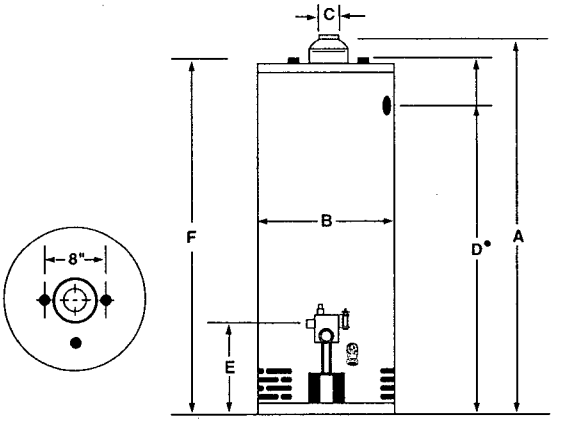
Dimensions and specifications subject to change without notice in accordance with our policy of continuous product improvement.

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.

Floor to space heating return for M-I-75S6BN 17¾"/451mm, M-I-100T6BN 17⅝"/448mm

Floor to space heating outlet for M-I-75S6BN 53"/1346mm, M-I-100T6BN 50⅝"/1286mm



•Optional T&P Location Dimension
"D" dimension listed as side/top.

BRADFORD WHITE CORPORATION
Ambler, PA

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**

International: Telephone **215-641-9400** • Telefax **215-641-9750** / Fax on Demand **888-538-7833** / **www.bradfordwhite.com**

BRADFORD WHITE-CANADA* INC. Sales / Technical Support **866-690-0961** / **905-238-0100** • Fax **905-238-0105** / **www.bradfordwhitecanada.com**

Count On Bradford White
For *Everything* Hot Water™