

BLOCK

~~324~~ 524

LOT

78,9+10

ADDRESS (SITE)

445 Central Ave

PERMIT NO.

3027-94

RECEIVED

SEP 22 1994



CONSTRUCTION PERMIT APPLICATION

Applicant must complete Sections I, II, III (optional), IV, VI and VII

I. IDENTIFICATION

1. Proposed Work-site at: 445 CENTRAL AVE

2. Name of Owner in Fee: RUDOLF DUKE Tel. [REDACTED]

Address 445 CENTRAL BRICK 08723

3. Ownership in Fee: Public _____ Private X

Principal Contractor: OWNER Tel. (____) _____

Address _____

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Federal Emp. No. _____ Social Security No. _____

5. Architect or Engineer _____ Tel. (____) _____

Address _____

6. Responsible Person In Charge of Work: OWNER Tel. (____) _____

II. PROPOSED WORK

- 1 ☐ Minor Work (single trade)
- 2 ☐ Small Job (\$5,000 and no prior approvals)
- 3 ☐ New Building
- 4 ☒ Addition
- 5 ☐ Alteration
- 6 ☐ Fire Protection
- 7 ☐ Plumbing
- 8 ☐ Electrical
- 9 ☐ Asbestos Abatement
- 10 ☐ Demolition

Est. Cost

TOTAL COSTS

\$7,000

Addition

OPTIONAL (for office use only)

Plans Rec'd. By	Date Rec'd.	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
<u>[Signature]</u>	<u>9/22/94</u>		<u>10/17/94</u>	<u>[Signature]</u>	<u>11/15/01</u>		<u>OK</u>
			<u>10-18-94</u>	<u>[Signature]</u>	<u>4/26/96</u>		<u>[Signature]</u>
			<u>10/12/94</u>	<u>[Signature]</u>	<u>1/27/95</u>		<u>[Signature]</u>
<u>[Signature]</u>	<u>9/28/94</u>		<u>9/28/94</u>	<u>[Signature]</u>			

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

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ 145-	35-	
2. Electrical		35-	
3. Plumbing	25-		
4. Fire Protection	19-		
5. Other			
6. Subtotal	\$ 269-		
7. Less 20% for State Plan Review	27-		
8. Subtotal	\$ 16		
9. DCA Training Fee			
10. Subtotal	\$ 35-		
11. Cert. of Occupancy			
12. Other <u>2PA + P.P.</u>	30.00		
13. TOTAL	\$ 377-		

VI. BUILDING/SITE CHARACTERISTICS EXISTING

		(office use only)
1. Number of Stories	1	26
2. Height of Structure	20 ft.	
3. Area—Largest Floor	1200 sq. ft.	
4. Building Area—All Floors	609 sq. ft.	625
5. Volume of Structure	7612 cu. ft.	9888
6. Construction Classification		
7. Total Land Area Disturbed	sq. ft.	
8. Flood Hazard Zone		
9. Base Flood Elevation	ft.	
10. Wetlands yes _____ no ☒	sq. ft.	
11. Fire Grading		
12. Max. Live Load		
13. Max. Occupancy Load		

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

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

No of dwelling units:

Before Construction _____

After Construction _____

Net gain or loss _____

B. NON-RESIDENTIAL

1. State Specific Use:

2. Use Group:

3. Change in Use Group. Indicate Former:

electrical & bldg.

Victoria 477-1466

LDS BR 10206283

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. (X) 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 R. Ruben Date Sept 24, 1994

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

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

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

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

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

() Check if contractor.

Agent Name _____

Address _____

Telephone (_____) _____

Signature _____ Date _____

OFFICE DATE RECEIVED: _____

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

COMMENTS

IMPORTANT
A.H.B.T. - EXEMPT

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

Name of Code & Edition

Name of Code & Edition

Other

Building _____
 Electrical _____
 Plumbing _____
 Fire Protection _____
 Mechanical _____

Energy _____
 Barrier Free _____
 Flood Hazard _____
 As Built Elevation Cert. _____
 Other _____

X. CERTIFICATES ISSUED (office use only)

DATE EXPIRED

- ☐ Temporary Certificate of Occupancy
☐ Temporary Certificate of Occupancy
☐ Continued Certificate of Occupancy
☐ Certificate of Occupancy
☐ Certificate of Approval
☐ None

No. _____
 No. _____
 No. _____
 No. _____
 No. _____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

0010
3027**
BLOCK 524 # 0.00
LOT 7 # 0.00
BUILDING 35.00
ELECTRIC* 35.00
TOTAL 70.00
CHECK 70.00
CHANGE 0.00
NO. 5 0012A005 10:40

Update Issued 04/17/2000
Control #
Permit # 94-3027+A
Permit Issued 10/20/1994

UCC NEW JERSEY
PERMIT UPDATE

IDENTIFICATION Block 524 Lot 7 Qual

Work Site Location 445 CENTRAL AVE
REINSTATE BLDG/ELECTRIC

Contractor HOMEOWNER
Address

Owner in Fee DUKE, RUDOLF
Address SAME

Telephone ()

BRICK, NJ 08723-

Lic. No. or Bldrs. Reg. No.

Telephone

Federal Emp. No. HO-

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

REINSTATE OLD PERMIT PER JOE CURRIAZZA

PAYMENTS (Office Use Only)
Building 35
Electrical 35
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other
DCA Training Fee 0
Cert. of Occupancy 0
Other
Total 70
Check No. 614
Cash
Collected By LRT

Estimated Cost of Work \$ 200

Construction Official

04/17/2000
Date

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 04/17/2000
Date Issued 04/17/2000
Control #
Permit # 94-3027+A

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

Block 524 Lot 7 Qual
Work Site Location 445 CENTRAL AVE
REINSTATE BLDG/ELECTRIC

Owner in Fee DUKE, RUDOLF
Address SAME
BRICK, NJ 08723-

Tele. [REDACTED]
Contractor
Address

Tele. () Fax ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. HQ-

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Req.			Type	Failure Failure Approval Initial
☐ All			Footing	
☐ Footing			Foundation	
☐ Foundation			Slab	
☐ Frame			Frame	
☐ Other			BarrierFree	
Joint Plan Review Required:			Insulation	
☐ Elect	☐ Plumb	☐ Fire	Finishes	
SUBCODE APPROVAL			Energy	
☐ CO	☐ CCO	☒ CA	Mechanical	
Date: 1-3-01			FCO	
Approved By: [Signature]			Other	
			Final	09/18/00
			BarrierFree	

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work:
Present R-3		Proposed R-3	
Constr. Class	Present	Proposed	
No. of Stories	0		1. New Bldg. \$ 100
Height of Structure	0 Ft.		2. Alteration \$ 0
Area Largest Floor	0 Sq. Ft.		3. Total (1+2) \$ 100
New Bldg. Area/All Floors	0 Sq. Ft.		Industrialized Building:
Volume of New Structure	0 Cu. Ft.		☐ State Approved
Total Land Area Disturbed	0 Sq. Ft.		☐ HUD

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

REINSTATE OLD PERMIT PER JOE CORRIAZZA

TYPE OF WORK

☐ New Building	
☒ Addition	
☐ Alteration	
☐ Roofing	
☐ Siding	
☐ Fence	0 Height (exceeds 6')
☐ Sign	0 Sq. Ft.
☐ Pool	
☐ Asbestos Abatement Subchapter 8	
☐ Lead Haz. Abatement NJAC 5:17	
☐ Other	
☐ Other	
☐ Demolition	

FEE (Office Use Only)

\$	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0

Administrative Surcharge	\$	0
Paid ☐ Check #	Minimum Fee	\$ 35
Collected by:	TOTAL FEE	\$ 35
	DCA Training Fee	\$ 0



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received 10/20/94
Date Issued _____
Control # _____
Permit # 3024-94

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

Block 20 524 Lot 7, 8, 9 & 10
Work Site Location 445 CENTRAL AVE
BRICK 08723
Owner in Fee RUDOLF DUKE
Address SAME AS ABOVE
Tele. [REDACTED]
Contractor OWNER
Address SAME
Tele. (_____) _____
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. _____ or Social Security No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)	
☐ No Plans Req.				Type:	Failure	Failure	Approval
☒ All		<u>10/17/94</u>	<u>[Signature]</u>	Footings			<u>10/27/94</u>
☒ Footing				Foundation			<u>11/4/94</u>
☐ Foundation				Slab			
☐ Frame				Frame			<u>2-3-95</u>
☐ Other				Insulation			<u>2-6-95</u>
Joint Plan Review Required:				Finishes:			
☐ Elec.	☐ Plumb.	☐ Fire		Energy			
SUBCODE APPROVAL				Mechanical			
☐ CO	☐ CCO	☐ CA		TCO			
Date: _____				Other			
Approved By: _____				Final			

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories 1
Height of Structure 20 Ft.
Area—Largest Floor 222 625 Sq. Ft.
New Bldg. Area/All Floors 547 625 Sq. Ft.
Volume of New Structure 4226 7812 Cu. Ft.
Total Land Area Disturbed 547 625 Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ 7,000
2. Alteration \$ _____
3. Total (1+2) \$ 7,000

C. CERTIFICATION IN LIEU OF OATH

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

[Signature]
Signature

**D. TECHNICAL SITE DATA
DESCRIPTION OF WORK**

Adding 3 B.P. (Adding 3 bedrooms, 2 pieces of lumber, 30" deep footing)
will be removing partition walls in existing house when new addition is done & they will bring in for permit update - existing bedroom will no longer exist when new one completed
TYPE OF WORK:
☐ New Building
☒ Addition
☐ Alteration
☒ Roofing
☒ Siding
☐ Fence _____ Height (6' or over)
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Asbestos Abatement
☐ Other _____
☐ Other _____
☐ Demolition

**(Office Use Only)
FEE**

\$ _____

Administrative Surcharge \$ _____
Paid ☐ Check # _____ Minimum Fee \$ _____
Collected by: _____ DCA TRAINING FEE \$ _____
TOTAL FEE \$ _____



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

10/20/94
3024-94

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

Block 23 524 Lot 7,8,9,10
Work Site Location 445 CENTRAL AVE
BRICK 08223
Owner in Fee RUDOLF DUKE
Address SAME AS ABOVE
Tele. [REDACTED]
Contractor OWNER
Address SAME
Tele. [REDACTED]
Lic. No. or Bldrs. Reg. No. [REDACTED]
Federal Emp. No. [REDACTED] or Social Security No. [REDACTED]

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)	Initial
☐ No Plans Req.			Type:	Failure	Approval
☒ All	10/17/94	R	Footings		
☐ Footing			Foundation		
☐ Foundation			Slab		
☐ Frame			Frame		
☐ Other			Insulation		
Joint Plan Review Required:			Finishes:		
☐ Elec. ☐ Plumb. ☐ Fire			Energy		
SUBCODE APPROVAL			Mechanical		
☐ CO ☐ CCO ☐ CA			TCO		
Date:			Other		
Approved By:			Final		

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____ Est. Cost of Bldg. Work:
Constr. Class Present _____ Proposed _____ 1. New Bldg. \$ 7,000
No. of Stories 1 2. Alteration \$ _____
Height of Structure 20 Ft. 3. Total (1+2) \$ 7,000
Area—Largest Floor 625 Sq. Ft.
New Bldg. Area/All Floors 625 Sq. Ft.
Volume of New Structure 7812 Cu. Ft.
Total Land Area Disturbed 625 Sq. Ft.

C. CERTIFICATION IN LIEU OF OATH

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

Signature [Signature]

**D. TECHNICAL SITE DATA
DESCRIPTION OF WORK**

Adding 3 B.R. & 2 bedrooms under existing wall 30" deep
will be removing partition walls in existing house when new addition is done & they will break up for permit update - existing bedrooms will no longer exist when new are completed

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

(Office Use Only)
FEE

\$	
\$	
\$	
\$	
\$	
\$	
\$	
\$	
\$	
\$	

Administrative Surcharge \$ _____
Paid ☐ Check # _____ Minimum Fee \$ _____
Collected by: _____ DCA TRAINING FEE \$ _____
TOTAL FEE \$ _____



**ELECTRICAL
SUBCODE
TECHNICAL SECTION**



Date Received _____
Date Issued _____
Control # _____
Permit # _____

JAN 25 95 00 00 8 0 2

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION WHEN CHANGING

CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 524 Lot 7-10

Work Site Location 445 Central Ave

Brick, NJ 08123

Owner In Fee Rudolf H. Duke Duke

Address SAME

Tele. () _____

Contractor SAME

Address _____

Tele. [REDACTED]

Lic. No. _____

Federal Emp. No. _____ or Social Security No. [REDACTED]

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed addition

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 300.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW:

[] No Plans Required

Joint Plan Review Required:

[] Bldg. [] Plumb.

[] Fire [] Elevator

[] Elec. Plans Approved

Date: _____

Approved by: _____

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date: _____

Approved By: _____

INSPECTIONS

Type:

Rough

Temporary

Constr. Serv.

TCO

Other

Service

Final

Dates (Month/Day)

Failure

Failure

Approval

Initial

11/31/95

RK

1/5/96

[Signature]

Temp. Cut-in-Card Date Issued _____

Final Cut-in-Card Date Issued _____

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM
<u>4</u>		Fixtures (1)
<u>21</u>		Receptacles (2)
<u>8</u>		Switches (3)
<u>33</u>		Total 1 + 2 + 3
_____		Kw Range
_____		Kw Oven(s)
_____		Kw Surface Unit
_____		hp Dishwasher
_____		hp Garbage Disposal
_____		Kw Dryer
_____		Kw A/C Unit
_____		Burglar Alarms
_____		Intercoms Panels
<u>4</u>		Smoke Detectors
_____		hp Whirlpool/spa
_____		Pool Bonding
_____		hp Pool Filter Motor
_____		Pool Lights
_____		Kw Water Heater(s)
_____		Kw Central heat:
_____		oil, gas or elec.
_____		Kw Baseboard Heat Units
_____		Thermostats
_____		hp Heat Pump
_____		hp Pump(s)
_____		Amp Motor Control Center/Sub Panels
_____		Signs
_____		Light Standards
_____		hp Motors—Fractional H.P.
_____		hp Motors—All Others
_____		Kw Transformers
<u>410</u>		Kw Generators
_____		Amp Service Entrance
_____		Other

FEE (Office Use Only)

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]

Signature—Contractor Seal

[] Licensed Electrical Contractor [☒] Exempt Applicant

Paid [] Check # 711 Administrative Surcharge \$ _____
Minimum Fee \$ _____
DCA Training Fee \$ _____
Collected by: _____ TOTAL FEE \$ 40.00

U.C.C. Form F-1208

RF

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

USE NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 04/17/2000
Date Issued 04/17/2000
Control #
Permit # 94-3027+A

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

Block 524 Lot 7 Qual _____
Work Site Location 445 CENTRAL AVE
REINSTATE BLDG/ELECTRIC
Owner in Fee DUKE, RUDOLF
Address SAME
BRICK, NJ 08723-
Tele. () _____ Fax () _____
Contractor _____
Address _____
Tele. () _____
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. HO-

B. ELECTRICAL CHARACTERISTICS

Use Group - Present R-3 Proposed R-3
[] Pole/Pad # _____ [] Temporary [] Other _____
Building Occupied as _____ Utility Co. _____
Estimated Cost of Electrical Work \$ 100

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[] No Plans Required
Joint Plan Review Required:
[] Bldg [] Plumb
[] Fire [] Elevator
[] Elect Plans Approved
Date: _____
Approved By: _____
SUBCODE APPROVAL
[] CO [] CC0
Date: 8/20/00
Approved By: LM

INSPECTIONS	Dates (Month/Day)	Type	Failure	Approval	Initial
Rough					
Temp Serv					
Const Serv					
TCO					
Other					
Service					
Final					

Temp. Cut-in-Card Date Issued _____
Final Cut-in-Card Date Issued _____
9/18/00
over I

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
0		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract AP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/P.A.C. Panel	
0		TOTAL NUMBERS	0
0		Pool Permit/with UV Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
0	0	Other <u>REINSTATE</u>	35
0	0	Other	0

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 Electrical Contractor [] Exempt Applicant

Administrative Surcharge \$ _____
Paid [] Check # _____ Minimum Fee \$ _____
Collected by: _____ TOTAL FEE \$ 35
DCA Training Fee \$ _____

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 04/17/2000
 Date Issued 04/17/2000
 Control #
 Permit # 94-3027+A

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

Block 524 Lot 7 Qual _____
 Work Site Location 445 CENTRAL AVE
REINSTATE BLDG/ELECTRIC
 Owner in Fee DUKE, RUDOLF
 Address SAME
BRICK, NJ 08723-
 Tele. (____) _____ Fax (____) _____
 Contractor _____
 Address _____
 Tele. (____) _____
 Lic. No. or Bldrs. Reg. No. _____
 Federal Emp. No. HO-

B. ELECTRICAL CHARACTERISTICS

Use Group - Present E-3 Proposed E-3
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
 Building Occupied as _____ Utility Co. _____
 Estimated Cost of Electrical Work \$ 100

JOB SUMMARY (Office Use Only)

PLAN REVIEW
☐ No Plans Required
 Joint Plan Review Required:
☐ Bldg ☐ Plumb
☐ Fire ☐ Elevator
☐ Elect Plans Approved
 Date: _____
 Approved By: _____
SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA
 Date: _____
 Approved By: _____

INSPECTIONS	Dates (Month/Day)			
Type	Failure	Failure	Approval	Initial
Rough	_____	_____	_____	_____
Temp Serv	_____	_____	_____	_____
Const Serv	_____	_____	_____	_____
TCO	_____	_____	_____	_____
Other	_____	_____	_____	_____
Service	_____	_____	_____	_____
Final	_____	_____	_____	_____
	Temp. Cut-in-Card	Date Issued	_____	_____
	Final Cut-in-Card	Date Issued	_____	_____

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 Electrical Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	_____
0		Receptacles	_____
0		Switches	_____
0		Detectors	_____
0		Light Poles	_____
0		Motors-Fract HP	_____
0		Emergency & Exit Lights	_____
0		Communications Points	_____
0		Alarm Devices/F.A.C. Panel	_____
0		TOTAL NUMBERS	0
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
0	0	HP/KW Space Heater/Air Handler	0
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
0	0	Other <u>REINSTATE</u>	35
0	0	Other _____	0

Administrative Surcharge \$ _____
 Paid ☐ Check # _____ Minimum Fee \$ _____
 Collected by: _____ TOTAL FEE \$ 35
 DCA Training Fee \$ _____



**ELECTRICAL
SUBCODE
TECHNICAL SECTION**



Date Received _____
Date Issued _____
Control # _____
Permit # _____

JAN 25 95 0 0 0 5 9 2

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

Block 524 Lot 7-10
Work Site Location 445 Central Ave
Brick, NJ 08723
Owner in Fee: Rudolf H Duke Duke
Address SAME
Tele. () _____
Contractor SAME
Address _____
Tele. () _____
Lic. No. _____
Federal Emp. No. _____ or Social Security No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed addition
[] Pole/Pad # _____ [] Temporary [] Other _____
Building Occupied as _____ Utility Co. _____
Est. Cost of Elec. Work \$ 300.00

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM
<u>4</u>		Fixtures (1)
<u>21</u>		Receptacles (2)
<u>8</u>		Switches (3)
<u>33</u>		Total 1 + 2 + 3
_____	Kw	Range
_____	Kw	Oven(s)
_____	Kw	Surface Unit
_____	hp	Dishwasher
_____	hp	Garbage Disposal
_____	Kw	Dryer
_____	Kw	A/C Unit
_____		Burglar Alarms
_____		Intercoms Panels
<u>4</u>		Smoke Detectors
_____	hp	Whirlpool/spa
_____		Pool Bonding
_____	hp	Pool Filter Motor
_____		Pool Lights
_____	Kw	Water Heater(s)
_____	Kw	Central heat:
_____		oil, gas or elec.
_____	Kw	Baseboard Heat Units
_____		Thermostats
_____	hp	Heat Pump
_____	hp	Pump(s)
_____	Amp	Motor Control Center/Sub Panels
_____		Signs
_____		Light Standards
_____	hp	Motors—Fractional H.P.
_____	hp	Motors—All Others
_____	Kw	Transformers
<u>1</u>	Kw	Generators
_____	Amp	Service Entrance
_____		Other

FEE (Office Use Only)

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS	Dates (Month/Day)			
[] No Plans Required	Type:	Failure	Failure	Approval	Initial
Joint Plan Review Required:	Rough	_____	_____	_____	_____
[] Bldg. [] Plumb.	Temporary	_____	_____	_____	_____
[] Fire [] Elevator	Constr. Serv.	_____	_____	_____	_____
[] Elec. Plans Approved	TCO	_____	_____	_____	_____
Date: _____	Other	_____	_____	_____	_____
Approved by: _____	Service	_____	_____	_____	_____
	Final	_____	_____	_____	_____
SUBCODE APPROVAL	Temp. Cut-in-Card Date Issued _____				
[] CO [] CCO [] CA	Final Cut-in-Card Date Issued _____				
Date: _____					
Approved By: _____					

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.

TR Duke

Signature—Contractor Seal

[] Licensed Electrical Contractor [☒] Exempt Applicant

Paid [] Check # 711 Administrative Surcharge \$ _____
Minimum Fee \$ _____
DCA Training Fee \$ _____
Collected by: _____ TOTAL FEE \$ 40.00

U.C.C. Form F-120B

RF

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy



**FIRE PROTECTION
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

10/20/94
3027-94

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

Block 20 524 Lot 7, 8, 9 & 10

Work Site Location 445 CENTRAL AVE

Owner in Fee RUDOLF DUKE

Address SAME

Tele. (908) 477-1466

Contractor OWNER

Address _____

Tele. (____) _____

Lic. No. _____

Federal Emp. No. _____ 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 \$ _____ [] Other _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:

[] No Plans Required

Joint Plan Review Required:

[] Bldg. [] Plumb.

[] Elec. [] Elevator

[X] Fire Plans Approved

Date: 9/10-18-94

Approved by: _____

SUBCODE APPROVAL:

[] CO [] CCO [X] CA

Date: 4/26/96

Approved by: _____

INSPECTIONS:

Type:

Suppression Test

Fire Alarm Test

Smoke Test

Mechanical

TCO

Other _____

Other _____

Other _____

Dates (Month/Day)

Failure

Failure

Approval

Initial

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

Wet Sprinkler Heads _____

Dry Sprinkler Heads _____

TOTAL _____

Smoke Detectors 4

Heat Detectors 4

TOTAL _____

Stand Pipes _____

Kitchen Hood Exhaust Systems _____

Pre-Engineered Systems

CO₂ Suppression _____

Halon Suppression _____

Foam Suppression _____

Dry Chemical _____

Wet Chemical _____

() Gas or Oil Fired Appliance _____

OTHER _____

FEE (Office Use Only)

46

33

79

C. CERTIFICATION IN LIEU OF OATH

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

[Signature]
SIGNATURE

U.C.C. Form F-140B

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy



**FIRE PROTECTION
SUBCODE
TECHNICAL SECTION**



Date Received 10/20/94
Date Issued _____
Control # 1
Permit # 3024-94

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

Block 30 534 Lot 7, 8, 9 & 10
Work Site Location 445 CENTRAL AVE
Owner in Fee RUDOLF DUKE
Address SAME
Tele. (_____) _____
Contractor OWNER
Address _____
Tele. (_____) _____
Lic. No. _____
Federal Emp. No. _____ 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 \$ _____ [] Other _____

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 _____

Wet Sprinkler Heads _____

Dry Sprinkler Heads _____

TOTAL _____

Smoke Detectors _____

Heat Detectors _____

TOTAL _____

Stand Pipes _____

Kitchen Hood Exhaust Systems _____

Pre-Engineered Systems _____

CO₂ Suppression _____

Halon Suppression _____

Foam Suppression _____

Dry Chemical _____

Wet Chemical _____

Gas or Oil Fired Appliance _____

OTHER _____

FEE (Office Use Only)

JOB SUMMARY (Office Use Only)

PLAN REVIEW:

[] No Plans Required

Joint Plan Review Required:

[] Bldg. [] Plumb.

[] Elec. [] Elevator

[X] Fire Plans Approved

Date: 9/10-18-94

Approved by: _____

SUBCODE APPROVAL:

[] CO [] CCO [] CA

Date: _____

Approved by: _____

INSPECTIONS:

Type:

Suppression Test

Fire Alarm Test

Smoke Test

Mechanical

TCO

Other

Other

Other

Dates (Month/Day)

Failure

Failure

Approval

Initial

C. CERTIFICATION IN LIEU OF OATH

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

SIGNATURE

U.C.C. Form F-140B

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

Administrative Surcharge \$ _____

Paid [] Check # _____ Minimum Fee \$ _____

DCA Training Fee \$ _____

Collected by: _____ TOTAL FEE \$ _____



**PLUMBING
SUBCODE
TECHNICAL SECTION**



Date Received 10/20/94
Date Issued _____
Control # 3027-94
Permit # _____

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

Block 524 Lot 28, 9, 10
Work Site Location 445 CENTRAL AVE
BRICKS
Owner in Fee SHANE RUDOLF DUKE
Address SHANE
Tele. [REDACTED]
Contractor OWNER
Address _____
Tele. (____) _____
Lic. No. _____
Federal Emp. No. _____ or Social Security No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size _____ Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Well _____
Estimated Cost of Plumbing Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS	Dates (Month/Day)			
	Type:	Failure	Failure	Approval	Initial
☐ No Plans Required	Slab	_____	_____	_____	_____
Joint Plan Review Required:	Rough	_____	_____	_____	_____
☐ Bldg. ☐ Elec.	Water	_____	_____	_____	_____
☐ Fire ☐ Elevator	Sewer	_____	_____	_____	_____
☐ Plumb. Plans Approved	Fixtures	_____	_____	_____	_____
Date: <u>10/12/94</u>	Gas Equipment	_____	_____	_____	_____
Approved by: <u>[Signature]</u>	Gas Piping	_____	_____	_____	_____
SUBCODE APPROVAL:	Solar	_____	_____	_____	_____
☐ CO ☐ CCO ☒ CA	TCO	_____	_____	_____	_____
Approved By: <u>[Signature]</u>		_____	_____	_____	_____
Date: <u>1-27-95</u>		_____	_____	_____	_____

C. CERTIFICATION IN LIEU OF OATH

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

[Signature]
Signature—Contractor Seal

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
_____	Water Closet	_____
_____	Urinal/Bidet	_____
_____	Bath Tub	_____
_____	Lavatory	_____
_____	Shower	_____
_____	Floor Drain	_____
_____	Sink	_____
_____	Dishwasher	_____
_____	Drinking Fountain	_____
_____	Washing Machine	_____
_____	Hose Bibb	_____
_____	Water Heater	_____
_____	Fuel Oil Piping	_____
_____	Gas Piping	_____
_____	Steam Boiler	_____
_____	Hot Water Boiler	_____
_____	Sewer Pump	_____
_____	Interceptor/Separator	_____
_____	Backflow Preventer	_____
_____	Greasetrap	_____
_____	Water Cooled A/C	_____
_____	or Refrigeration Unit	_____
_____	Sewer Connection	_____
_____	Water Service Connection	_____
<u>10</u>	Active Solar System <u>vent</u>	<u>10</u>
<u>1</u>	Other <u>furnace</u>	<u>15</u>
	Administrative Surcharge	\$ <u>25</u>
	Paid ☐ Check # _____ Minimum Fee	\$ _____
	DCA Training Fee	\$ _____
	Collected by: _____ TOTAL	\$ _____



**PLUMBING
SUBCODE
TECHNICAL SECTION**



Date Received 10/20/94
Date Issued _____
Control # _____
Permit # 3027-94

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

Block 524 Lot 78, 9, 10
Work Site Location 445 CENTRAL AVE
BRICK
Owner In Fee SAVE RUDOLF DUKE
Address SAME
Tels. [REDACTED]
Contractor OWNER
Address _____
Tels. (____) _____
Lic. No. _____
Federal Emp. No. _____ or Social Security No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size _____ Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Well _____
Estimated Cost of Plumbing Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS	Dates (Month/Day)			
	Type:	Failure	Failure	Approval	Initial
☐ No Plans Required	Slab				
Joint Plan Review Required:	Rough				
☐ Bldg. ☐ Elec.	Water				
☐ Fire ☐ Elevator	Sewer				
☐ Plumb. Plans Approved	Fixtures				
Date: <u>10/12/94</u>	Gas Equipment				
Approved by: <u>[Signature]</u>	Gas Piping				
SUBCODE APPROVAL:	Solar				
☐ CO ☐ CCO ☐ CA	TCO				
Approved By: _____					
Date: _____					

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]
Signature—Contractor Seal

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO. 1 FIXTURE/EQUIPMENT

Water Closet _____
Urinal/Bidet _____
Bath Tub _____
Lavatory _____
Shower _____
Floor Drain _____
Sink _____
Dishwasher _____
Drinking Fountain _____
Washing Machine _____
Hose Bibb _____
Water Heater _____
Fuel Oil Piping _____
Gas Piping _____
Steam Boiler _____
Hot Water Boiler _____
Sewer Pump _____
Interceptor/Separator _____
Backflow Preventer _____
Greasetrap _____
Water Cooled A/C _____
or Refrigeration Unit _____
Sewer Connection _____
Water Service Connection _____
Active Solar System Unit _____
Other furnace _____

FEE (Office Use Only)

Administrative Surcharge \$ 25
Paid ☐ Check # _____ Minimum Fee \$ _____
DCA Training Fee \$ _____
Collected by: _____ TOTAL \$ _____

TOWNSHIP OF BRICK

ZONING PERMIT

Date of Issue: Sept. 27, 1994

09/94 Z 0002

Block 524 Lot 7

Zone R-7.5

Property Address: 445 Central Ave., Cedarwood Park

Owner: Victoria & Rudolf Duke

(Phone): [REDACTED]

Applicant: Victoria Duke

(Phone): [REDACTED]

Use: Single-family dwelling

Proposed Construction (if any): 25' by 25' addition - 625 square feet -

Three bedrooms.

Conditions: _____

Please note that Building Permits, as well as Zoning Permits, must be obtained prior to any construction.

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

Sean Kivney
Land Use Officer

Comfortmaker®

Air Conditioning & Heating

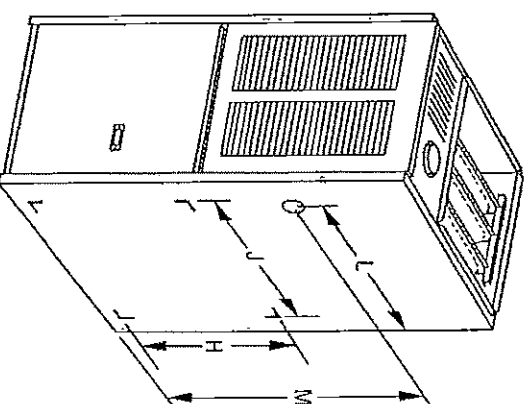
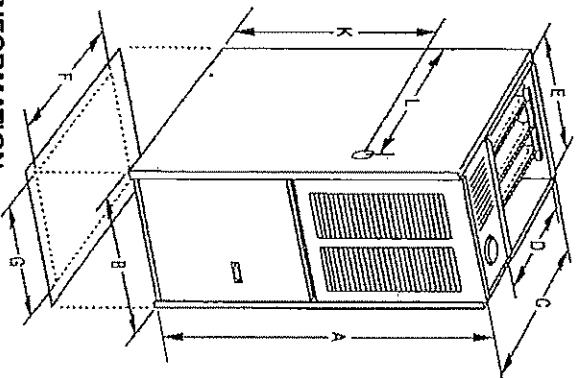
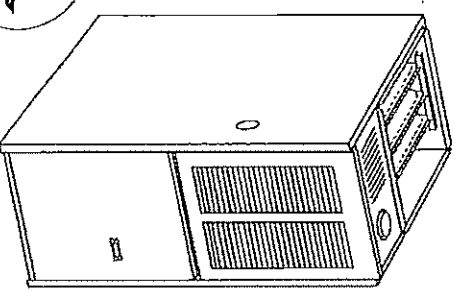
CGNI Series
SPECIFICATIONS
 Deluxe High Efficiency Gas Fired
 Uplow/Horizontal Furnace

STANDARD FEATURES

- A.G.A. DESIGN CERTIFIED
- CGA APPROVED
- CATEGORY I VERTICAL VENTING
- SINGLE PIPE HORIZONTAL VENTING
- FULLY ASSEMBLED AND PREWIRED
- INDUCED DRAFT POWER VENTOR
- THERMALLY LINED ONE PIECE STEEL CABINET
- RPJ II ALUMINIZED STEEL HEAT EXCHANGER
- BLOCKED FLUE SAFETY SWITCH
- TOTAL FURNACE CONTROL WITH BLOWER SWITCHING,
- 100% SAFETY SHUT-OFF, MULTI-TRY DIRECT IGNITION,
- DIAGNOSTIC LIGHT, AND T1 TIMER FEATURE
- HUMIDIFIER AND ELECTRONIC AIR CLEANER TERMINALS
- 24 VOLT TRANSFORMER
- MULTI-SPEED DIRECT DRIVE MOTOR
- LARGE PERMANENT FILTER WITH FILTER RACK
- 5 YEAR MOTOR AND CONTROL WARRANTY (LIMITED)
- 25 YEAR HEAT EXCHANGER WARRANTY (LIMITED)

WARRANTIES: (LIMITED)

Standard warranties of motor and controls are extended for a period of 5 years. Furnace Heat Exchangers are warranted for a period of 25 years against defects in workmanship or material. Limited warranties applicable to this equipment are set forth in the manufacturer's published warranty statement, which is available from our office (address on this literature) and from local distributors of our products in your area (see your phone directory).



DIMENSIONAL INFORMATION

MODEL GNI	CABINET			SUPPLY AIR			RETURN AIR			GAS CONNECTION		
							BOTTOM		SIDE			
	A	B	C	D	E	F	G	H		J	K	L
04SA012	40	15½	28½	18½	14	23½	12½	12¼	22½	28¼	26	23¾
06DA012	40	15½	28½	18½	14	23½	12½	12¼	22½	28¼	26	23¾
08DA012	40	19½	28½	18½	17½	23¼	14¼	14½	22½	28¼	26	23¾
08DA016	40	22¾	28½	18½	17½	23¼	14¾	14½	22½	28¼	26	23¾
10DA016	40	22¾	28½	18½	21¼	23¼	18¾	17	22½	28¼	26	23¾
10DA020	40	22¾	28½	18½	21¼	23½	18¾	17	22½	28¼	26	23¾
12DA020	40	22¾	28½	18½	21¼	23¼	18¾	17	22½	28¼	26	23¾

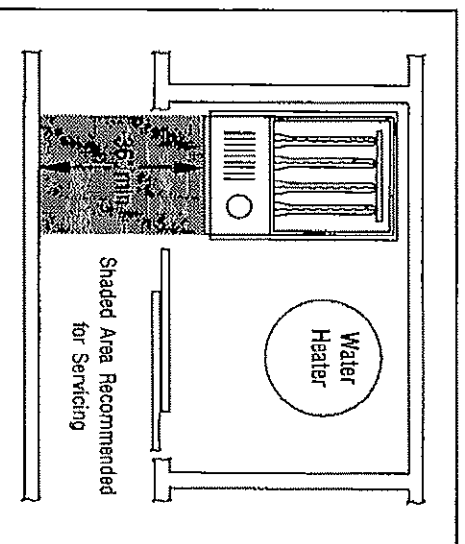
SPECIFICATION AND INFORMATION

MODEL	VOLTAGE (NAME PLATE)									
ELECTRICAL SPECIFICATION	MIN/MAX. VOLTAGE									
	115 / 120V									
	102 / 132V									
HEATING PERFORMANCE	MINIMUM CKT. AMPACITY	10.3	10.3	10.3	14.5	14.5	20	20		
	MAX. OVERCURRENT PROTECTION	15	15	15	20	20	25	25		
	INPUT BTUH	45,000	60,000	80,000	80,000	100,000	100,000	120,000		
MOTOR AND BLOWER INFORMATION	OUTPUT BTUH	36,000	48,000	65,000	84,000	80,000	80,000	96,000		
	AFLUE % (ICS) ELEC. IGN.	80.5	80.5	80.5	80.5	80.4	80.4	80.5		
	CALIFORNIA SEASONAL EFF	73.0	73.4	76.7	74.4	75.1	75.1	75.8		
AIR DELIVERY	MOTOR TYPE/NO. OF SPEEDS	PSC / DIRECT DRIVE / 3								
	MOTOR HP/RPM	1/3 / 1075	1/3 / 1075	1/3 / 1075	1/2 / 1075	1/2 / 1075	3/4 / 1075	3/4 / 1075		
	MOTOR FLA/LRA	6.9 / 11.8	6.9 / 11.8	5/4 / 8.6	10.3 / 13.6	10.3 / 13.6	14.9 / 28.1	14.9 / 28.1		
HEAT EXCHANGER	BLOWER TYPE/ QTY.	DIRECT DRIVE / 1								
	BLOWER WHEEL SIZE (DxW)	10 x 6	10 x 8	10 x 10	10 x 10	10 x 10	12 x 12	12 x 12		
	HI SPEED 0.5 ESP (CFM) SIDE / BOTTOM	1156 / 1188	1360 / 1394	1191 / 1131	1522 / 1543	1585 / 1641	2085 / 2050	1953 / 1935		
PIPING INFORMATION	LO SPEED 0.5 ESP (CFM) SIDE / BOTTOM	740 / 746	769 / 755	858 / 815	1285 / 1341	1366 / 1406	1457 / 1506	1243 / 1294		
	TEMP RISE RANGE F DEG	25-55	35-65	30-60	35-65	30-60	40-70	40-70		
	TYPE	HPJ II								
IGNITION SYSTEM	MATERIAL CONSTRUCTION	ALUMINIZED STEEL								
	NO. OF CELLS	2	3	4	4	5	5	6		
	GAS CONNECTION SIZE	1/2 INCH								
BURNER INFORMATION	VENT SIZE OPENING DIA. (IN) HORIZONTAL	3								
	TYPE	INTEGRATED HSI / BLOWER CONTROL								
	IGNITION SEQUENCE	SEVEN TRY								
GENERAL INFORMATION	FLAME PROVING INTERVAL	7 SECOND								
	SENSOR TYPE	FLAME RECTIFICATION								
	TYPE/MAT CONSTR.	INSHOT / ALUMINIZED								
AIR FILTER TYPE	BTUH CAPACITY PER BURNER	22,500			20,000					
	NO. OF BURNER ASSM.	2	3	4	4	5	5	6		
	AIR FILTER SIZE	14 x 25 x 1	14 x 25 x 1	16 x 25 x 1	16 x 25 x 1	20 x 25 x 1	20 x 25 x 1	20 x 25 x 1		
QUANTITY	SHIPPING WEIGHT LBS.	127	129	159	159	177	179	179		
	NET WEIGHT LBS.	122	124	154	154	172	174	174		

① CAPACITY AND EFFICIENCY RATINGS IN ACCORDANCE WITH D.O.E. TEST PROCEDURES.
 ② FLA BASED ON HIGHEST RATED AMPS FOR MOTORS APPROVED. FOR ACTUAL FLA REFER TO THE MOTOR NAME PLATE.
 ③ REFER TO BLOWER CHART FOR COMPLETE BLOWER INFORMATION.
 ④ REFER TO VENT TABLES IN INSTALLATION INSTRUCTIONS FOR VENT CONNECTION DIAMETER SIZE. IN MOST CASES A 3'-4" OR 3'-5" INCREASES WILL BE REQUIRED AT DISCHARGE VENTOR ASSEMBLY.

CLEARANCE DATA

SERVICE ACCESSIBILITY CLEARANCE



RECOMMENDED CLEARANCE TO COMBUSTIBLE MATERIALS FOR GNI			
	UPFLOW	HORIZONTAL	
REAR	0 INCHES	0 INCHES	
FRONT (LOUVERED DOOR) ①	6 INCHES	6 INCHES	
TOP OF PLENUM	1 INCH	1 INCH	
TOP OF FURNACE ②	6 INCHES ③	6 INCH	
SIDES	0 INCHES	0 INCHES ③	
SINGLE WALL VENT	6 INCHES	6 INCHES	
DOUBLE WALL VENT	1 INCH	1 INCH	
THERMO PLASTIC VENT ④	3 INCHES	3 INCHES	

① SERVICE ACCESS SHALL TAKE PRECEDENCE OVER CLEARANCE TO COMBUSTIBLE MATERIALS
 ② RECOMMENDED FOR PROPER VENTILATION
 ③ A MINIMUM OF 3 INCHES IS RECOMMENDED FOR INSTALLATION OF GAS PIPING. SIDES IN HORIZONTAL POSITION SAME AS SIDES IN UPFLOW. SIDES ARE SURFACES ADJACENT TO FRONT LOUVER DOOR
 ④ USE THERMOPLASTIC PIPE ONLY. WHEN HORIZONTALLY VENTING
 ⑤ FLUE OUTLET PANEL

CONTINUING ENGINEERING RESEARCH RESULTS IN STEADY IMPROVEMENT THEREFORE, THESE SPECIFICATIONS ARE SUBJECT TO CHANGE WITHOUT NOTICE. ALWAYS CONSULT EQUIPMENT NAMEPLATE FOR EXACT ELECTRICAL REQUIREMENTS.

GNI BLOWER PERFORMANCE DATA (Side Return)

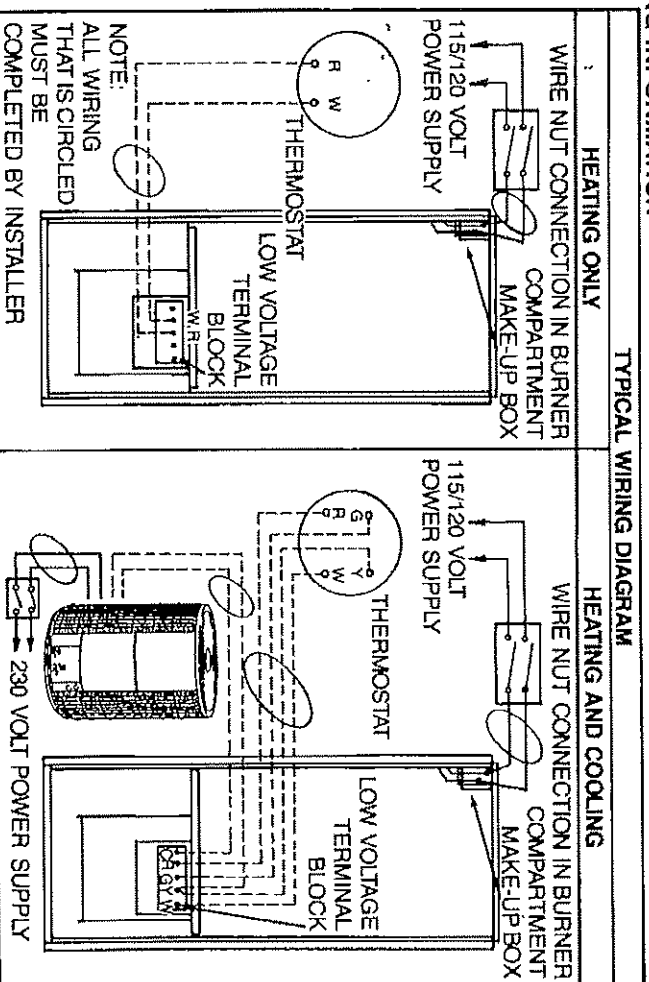
MODEL	WHEEL SIZE	MOTOR H.P.	SPEED	CFM									
				0.10	0.20	0.30	0.40	0.50	0.60	0.70			
045A012	10x6	1/3	Low	789	765	760	750	740	705	680			
			Med	1128	1100	1076	1042	1007	955	910			
			High	1383	1325	1265	1205	1156	1095	1031			
060A012	10x8	1/3	Low	764	770	774	772	769	755	721			
			Med	1171	1165	1159	1135	1118	1070	1032			
			High	1582	1510	1485	1405	1390	1280	1207			
080A012	10x10	1/3	Low	1067	1020	984	921	858	780	701			
			Med	1231	1180	1125	1080	1027	958	850			
			High	1432	1390	1334	1266	1191	1092	1028			
080A016	10x10	1/2	Low	1531	1470	1422	1370	1285	1205	1128			
			Med	1708	1640	1574	1488	1399	1315	1236			
			High	1841	1755	1678	1598	1522	1450	1384			
100A016	10x10	1/2	Low	1590	1535	1479	1419	1386	1285	1203			
			Med	1722	1669	1609	1540	1473	1398	1316			
			High	1859	1785	1710	1650	1585	1500	1421			
100A020	12x12	3/4	Low	1611	1575	1532	1480	1457	1395	1327			
			Med Low	1816	1765	1733	1670	1619	1560	1488			
			Med High	2005	1960	1923	1860	1805	1750	1681			
120A020	12x12	3/4	High	2250	2205	2158	2110	2065	1995	1922			
			Low	1357	1325	1290	1270	1243	1225	1195			
			Med Low	1542	1525	1503	1480	1464	1430	1401			
			Med High	1709	1750	1761	1740	1710	1650	1602			
			High	2073	2040	2014	1975	1953	1885	1827			

2 SIDED RETURN AIR

GNI BLOWER PERFORMANCE DATA (Bottom Return)

MODEL	WHEEL SIZE	MOTOR H.P.	SPEED	CFM									
				0.10	0.20	0.30	0.40	0.50	0.60	0.70			
045A012	10x6	1/3	Low	804	795	786	765	746	725	699			
			Med	1129	1150	1121	1080	1046	1000	937			
			High	1417	1380	1307	1250	1188	1120	1051			
060A012	10x8	1/3	Low	764	775	783	765	755	725	696			
			Med	1187	1170	1154	1132	1107	1052	1010			
			High	1555	1510	1453	1396	1334	1270	1187			
080A012	10x10	1/3	Low	1013	965	935	875	815	741	665			
			Med	1169	1121	1068	1026	975	890	807			
			High	1360	1320	1267	1200	1131	1038	976			
080A016	10x10	1/2	Low	1563	1501	1459	1390	1341	1255	1171			
			Med	1709	1650	1591	1508	1443	1365	1271			
			High	1804	1748	1697	1620	1543	1450	1347			
100A016	10x10	1/2	Low	1607	1550	1516	1450	1405	1330	1258			
			Med	1765	1700	1630	1570	1510	1425	1344			
			High	1919	1855	1771	1705	1641	1555	1459			
100A020	12x12	3/4	Low	1674	1640	1607	1534	1508	1405	1335			
			Med Low	1842	1775	1723	1650	1583	1501	1439			
			Med High	2067	1950	1867	1780	1720	1670	1590			
120A020	12x12	3/4	High	2332	2265	2191	2130	2047	1990	1906			
			Low	1420	1390	1359	1324	1294	1235	1187			
			Med Low	1568	1535	1493	1460	1428	1390	1352			
			Med High	1791	1740	1705	1680	1625	1570	1511			
			High	2155	2100	2047	1995	1935	1870	1811			

TYPICAL WIRING INFORMATION



FILTER REQUIREMENTS (HEATING AND COOLING) ①

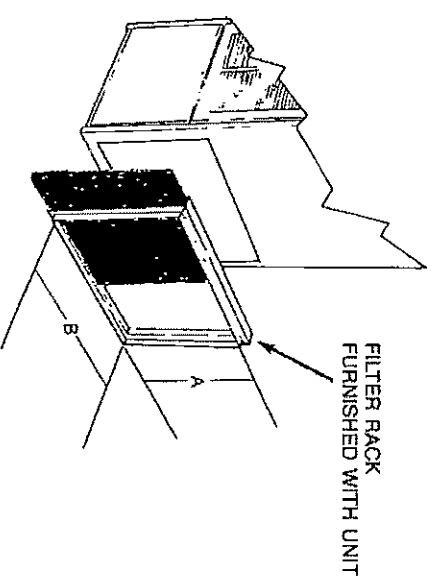
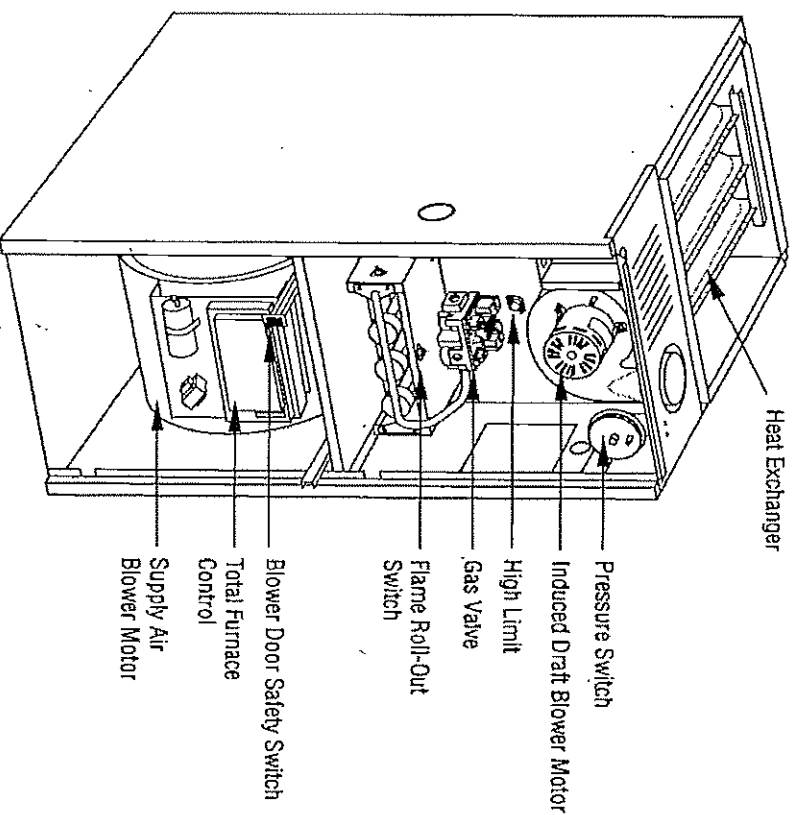
MODEL NO. GNI	FACTORY SUPPLIED EXTERNAL SIDE OR INTERNAL BOTTOM FILTER RACK	OPTIONAL FILTER KITS	
		EXTERNAL STAND-OFF FILTER RACK KIT	
045A012	(1) 14 x 25 x 1	—	
060A012	(1) 14 x 25 x 1	—	
080A012	(1) 16 x 25 x 1	—	
080A016	(1) 16 x 25 x 1	—	
100A016	(1) 20 x 25 x 1 ②	8G05016	
100A020	(1) 20 x 25 x 1 ②	8G05016	
120A020	(1) 20 x 25 x 1 ②	8G05016	

① FILTERS ARE RATED AT 520 FPM OR MORE (WASHABLE TYPE).
 ② FOR SIDE RETURN APPLICATIONS OVER 1700 CFM, USE 20 x 25
 STANDOFF FILTER RACK KIT.

ACCESSORIES

DESCRIPTION	PART NUMBER	SHIP WT. LBS.	WHERE USED
HIGH ALTITUDE KIT (NAT GAS)	8G07914	1	ALL NAT. GAS UNITS
NAT. TO LPG. CONVERSION AND HIGH ALTITUDE KIT	8G07915	1	ALL NAT. GAS UNITS
STAND-OFF FILTER RETURN KIT LESS FILTER	8G05016	10	GNI 100, 120

SPECIAL FEATURES



FLANGE DIMENSION
OF FILTER RACK
FURNISHED WITH UNIT

MODEL	DIMENSION	
	A	B
GNI045	12 1/4	22 1/2
GNI060	12 1/4	22 1/2
GNI080	14 1/4	22 1/2
GNI100	18 1/2	22 1/2
GNI120	18 1/2	22 1/2

A Name You Can Be Comfortable With



Quality endures. The Comfortmaker brand name is here to tell the history of manufacturing the finest

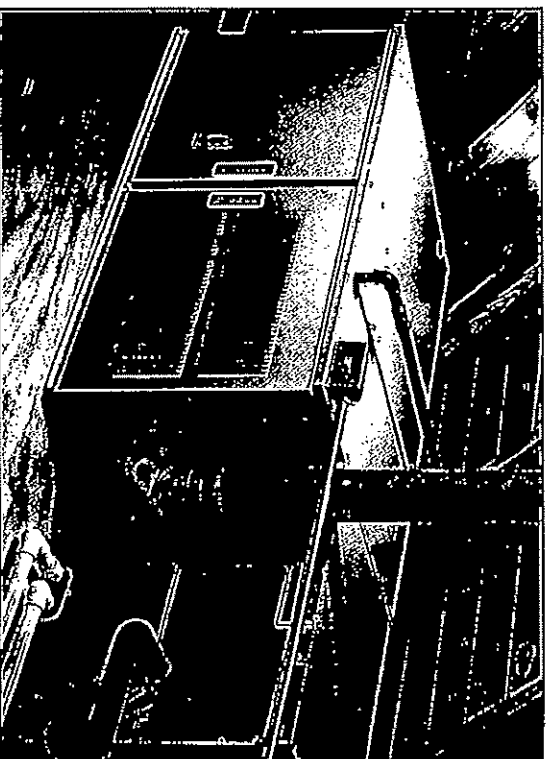
in heating and cooling equipment. Indeed, our heritage can be traced back nearly 100 years to the founding of a furnace company in Saint Louis in 1860. As we grew and expanded to make people more comfortable ever since

today, the Comfortmaker name is a member of the Integrity Products Corporation (IPS). Many of our Inter-City Products is one of the best-selling manufacturers of residential heating and cooling equipment in North America. So you can purchase your Comfortmaker home comfort products with confidence. Knowing the value and quality resources of a world-class company.

Comfortmaker®

Air Conditioning & Heating

High Efficiency/Low Profile Gas Furnace—A Powerful Furnace In A Small Package

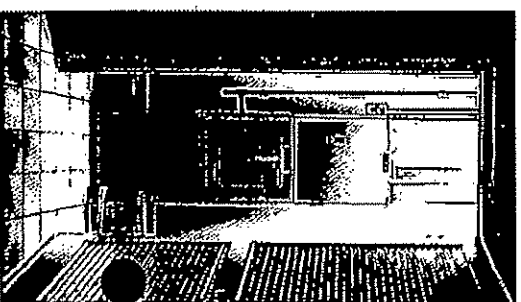


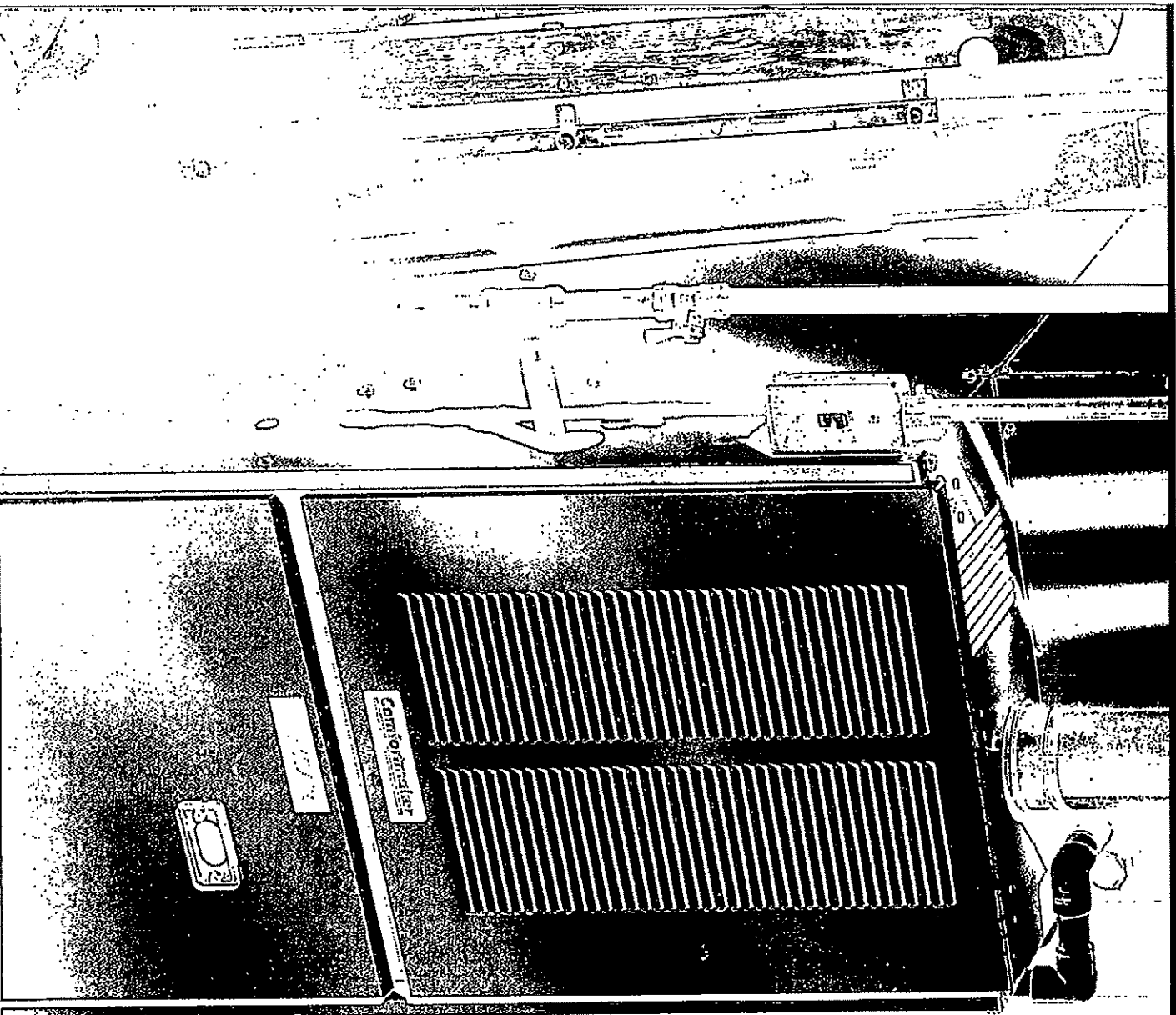
The Height Of Efficiency

A Comfortmaker High Efficiency/Low Profile gas furnace is only 40 inches tall. But don't let the compact size fool you. This powerful little furnace has everything it takes to keep your home warm and cozy all winter long. And energy efficiencies as high as 80% AFUE could mean substantial reductions in your heating bills—month after month!

Go With The Flow

The Comfortmaker High Efficiency/Low Profile gas furnace is available in three models. An upflow configuration (GU) is designed for homes with basements or main-floor closet installations. A downflow (GD) is also ideal for closet installations. And our new multi-position model (GN) can be installed standing up or on its side—making it just right for installation in an attic or crawlspace. A variety of airflow configurations, coupled with the compact size, gives these units the ability to go where no gas furnace has gone before.





*High Efficiency/Low Profile
Gas Furnace—
Big Features In A Small Furnace*

Comfortmaker
Air Conditioning & Heating

How To Buy A New Heating System

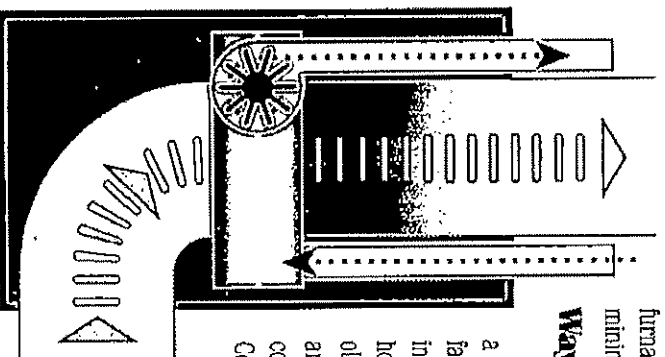
If you're like most people, your home is your biggest investment. And a new heating system is a big investment in your home! So we offer the following information to help you with your buying decision.

The Heating Process

A gas furnace ignites natural or propane gas and uses it to heat a heat exchanger. A blower draws in air and passes it over the heat exchanger, which warms the air. This warm air is then circulated through ducts to heat your home, while exhaust vapors from fuel combustion are vented outside.

Energy Ratings

Gas furnace efficiency is rated by using the "Annual Fuel Utilization Efficiency," also known as the "AFUE." Because some of the heating potential of natural gas or propane is lost during furnace operation, no furnace is considered 100% energy efficient. The AFUE percentage tells you the amount of fuel burned that actually goes toward heating your home on an annual basis. The most efficient furnaces carry the highest AFUE ratings and can offer the most energy savings, depending on local fuel costs and climate.



Federal Minimum Efficiency Standards

Beginning in 1992, Federal Government regulations set minimum efficiency standards for a variety of home heating and cooling products, including gas furnaces. Furnaces currently being manufactured must achieve energy efficiencies of 78% AFUE or higher. Rest assured, all of today's Comfortmaker gas furnaces meet or exceed Department of Energy minimum efficiency standards.

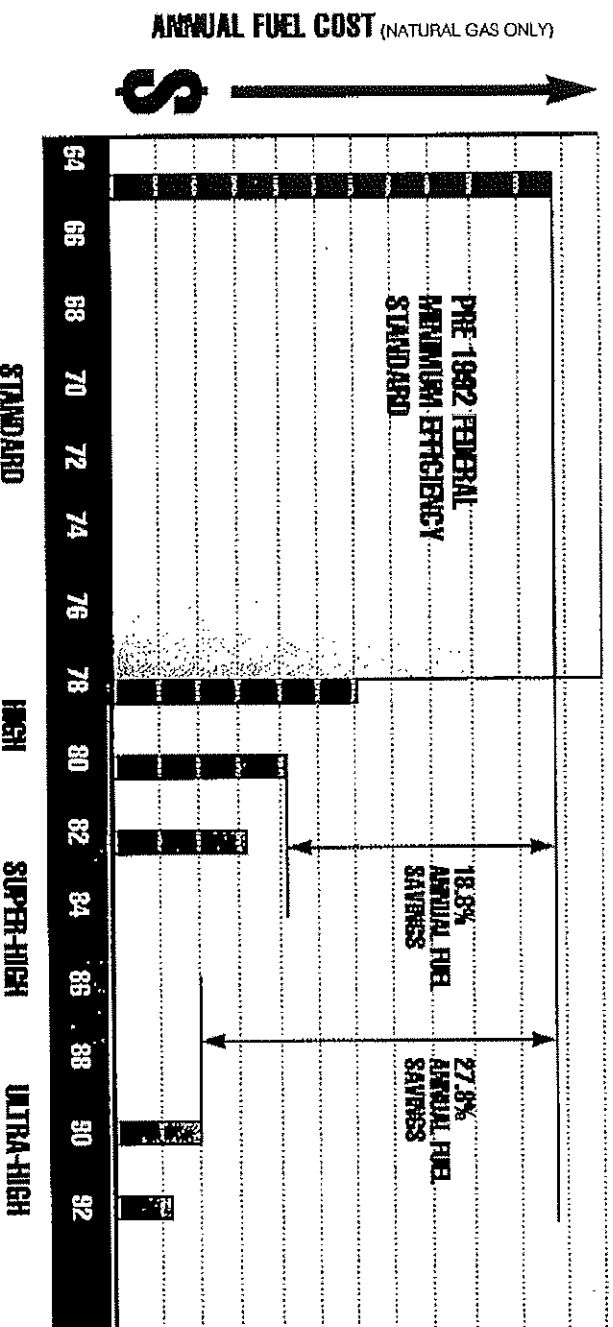
Ways To Save

The amount of money you can save with a higher efficiency furnace depends on several factors, including the part of the country you live in, local utility rates, and the construction of your home. If your furnace is 10 to 15 years old or older, its energy-efficiency rating is probably around 65% AFUE. Depending on operating conditions, installing a high efficiency Comfortmaker furnace now could mean big savings on your monthly utility bills for years to come!

Added Comfort

Want to make your home even more comfortable? Add an electronic air cleaner, humidifier, or electrostatic filter when your new furnace is installed. These devices can greatly improve indoor air quality—including the removal of many allergy-causing particles—and give you maximum control of the humidity level in your home.

HOW MUCH CAN I SAVE?



Annual fuel costs are based on a furnace operating at the national average of 2000 hours/year and are meant to be used for relative % energy savings as AFUE increases, and are not to be used for actual energy cost calculations.

The Control

The General 90 Total Furnace Control is another

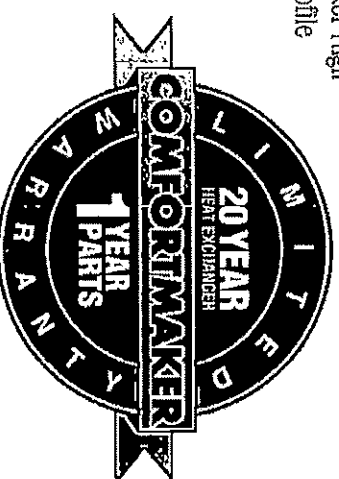


Comfortmaker product innovation you'll find on every High Efficiency/Low Profile gas furnace. It places all furnace controls and electrical connections into one simple package, for easy installation and

speedy service. Plus, the unique LED diagnostic display directs the service technician to the trouble-spot if problems ever arise. And our multi-position model features an enhanced General 90 with pre-wired connections for a humidifier and electronic air cleaner!

We Stand Behind It

The Comfortmaker brand is well-known for quality. And when you build better heating and cooling equipment, you back it better, too. So every Comfortmaker High Efficiency/Low Profile gas furnace is covered by a 20 year limited warranty on the heat exchanger and a 1 year limited warranty on all other parts—see published warranty for complete details. Get the big time comfort and energy efficiency your home deserves, with a Comfortmaker High Efficiency/Low Profile gas furnace.



MODEL	INPUT CAPACITY (BTU/H)	AFUE	COOLING CAPACITY (TONS)	DIMENSIONS H x W x D (INCHES)
GU050A012	50,000	80.0	1½-3	40 x 15½ x 28½
GU075A012	75,000	80.0	2-3	40 x 15½ x 28½
GU075A016	75,000	80.0	2½-4	40 x 19½ x 28½
GU100A012	100,000	80.0	2-3	40 x 19½ x 28½
GU100A016	100,000	80.0	2½-4	40 x 19½ x 28½
GU125A020	125,000	80.0	3½-5	40 x 22¾ x 28½
GU150A020	150,000	80.0	3½-5	40 x 22¾ x 28½
GD050A012	50,000	80.0	1½-3	40 x 15½ x 28½
GD075A012	75,000	80.0	2-3	40 x 15½ x 28½
GD075A016	75,000	80.0	2½-4	40 x 19½ x 28½
GD100A012	100,000	80.0	2-3	40 x 19½ x 28½
GD100A016	100,000	80.0	2½-4	40 x 19½ x 28½
GD125A020	125,000	80.0	3½-5	40 x 22¾ x 28½
GD150A020	150,000	80.0	3½-5	40 x 22¾ x 28½
GN050A012	50,000	80.0	1½-3	40 x 15½ x 28½
GN075A012	75,000	80.0	2-3	40 x 15½ x 28½
GN075A016	75,000	80.0	2½-4	40 x 19½ x 28½
GN100A012	100,000	80.0	2-3	40 x 19½ x 28½
GN100A016	100,000	80.0	2½-4	40 x 19½ x 28½
GN125A020	125,000	80.0	3½-5	40 x 22¾ x 28½
GN150A020	150,000	80.0	3½-5	40 x 22¾ x 28½

Quality—Inside And Out

6 Space-Saving Low Profile Design allows these models to fit where other gas furnaces won't. Plenty of room for installation of high efficiency cooling coils to further enhance system efficiency.

2 RPI II Heat Exchanger is built from durable aluminized steel. Provides superior heat transfer and reliability. Non-welded construction eliminates potential welding problems and reduces heat-up and cool-down times.

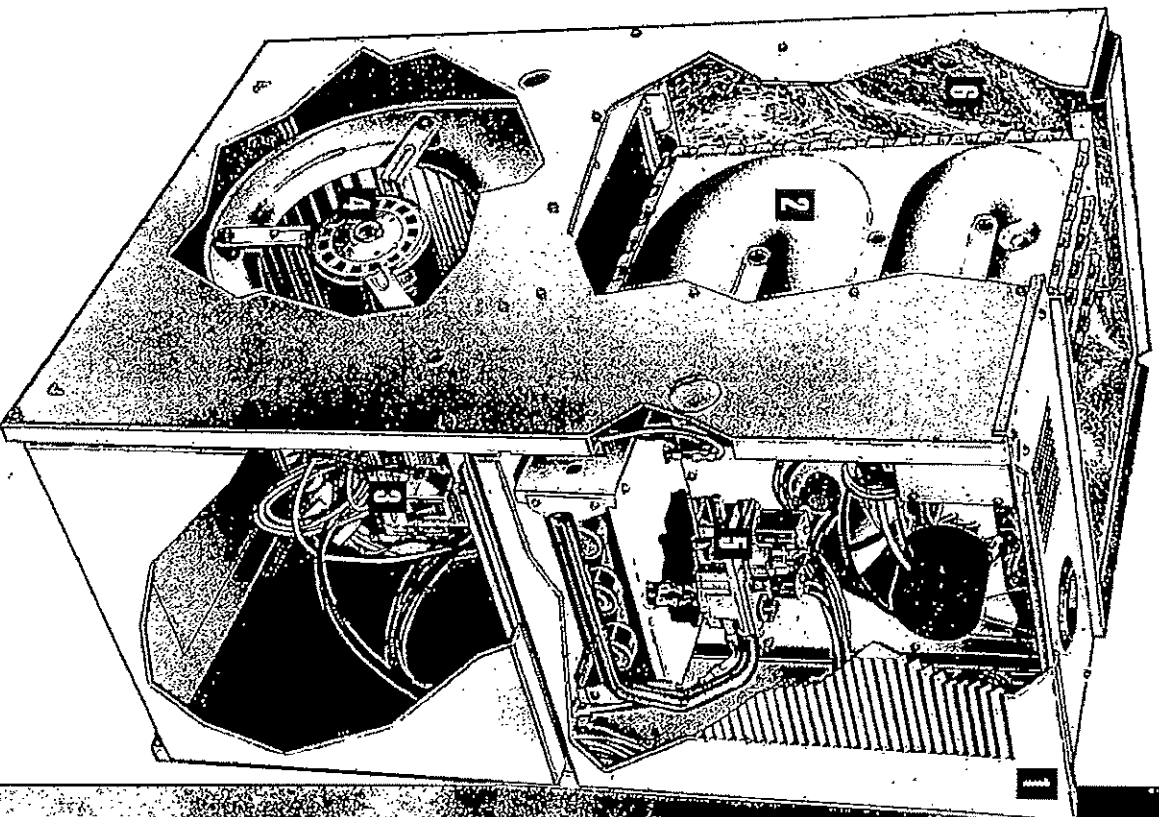
3 General purpose burner, combustion gas air furnace, and blower fans in one simple package for quick installation and easy service. Built-in LED diagnostic display indicates furnace problems to trouble shoot the difficulty, even a gas problem.

4 Multiple Speed blower operates quietly. Allows proper airflow throughout the furnace, even when certified air conditioning is added.

5 Redundant Gas Valve ensures reliable furnace gas control time and time off.

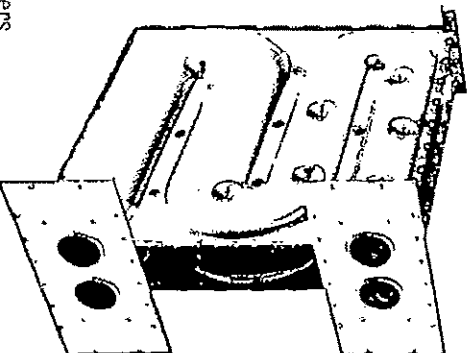
6 Fully-insulated, Reinforced Steel Cabinet prevents heat leakage, and reduces operating noise. Through the patent listed, this carefully-supplied and engineered steel floor added durability.

■ Airtight filter and flue gases air filter extremely easy to locate and change. Simply slide out filter and slide new one in where it fits. No need to replace entire filter assembly.



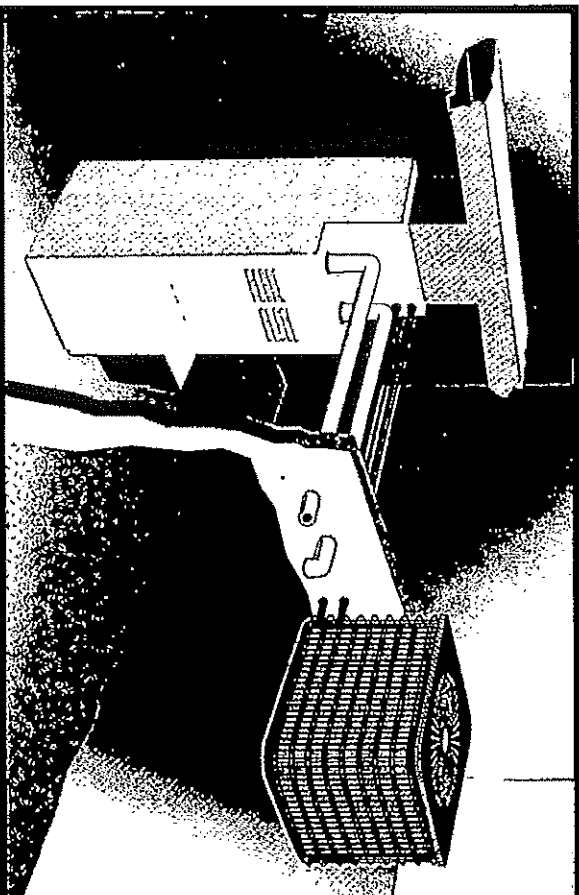
Heart Of The Heat

The heat exchanger is the heart of any furnace, and our High Efficiency/Low Profile series has a great one: the remarkable RPI II non-welded heat exchanger. Most heat exchangers are assembled with welds, which are prone to cracking when the heat exchanger expands and contracts during normal heat-up and cool-down cycles. The patented process used to create the RPI II heat exchanger replaces welds with an industrial crimping process that produces a far more reliable seal. And because it's made of aluminized steel, the RPI II heat exchanger resists the corrosion that plagues less-advanced heat exchangers.



Years Of Comfort, Seasons Of Savings

The Comfortmaker brand offers a complete line of home heating and cooling equipment. From gas and oil furnaces, to air conditioners, to heat pumps, to indoor coils and blowers, we've got whatever it takes to keep you comfortable. And it's all backed by the strength of Inter-City Products — one of the largest manufacturers of residential heating and cooling products in North America! Wherever you live, whatever your needs, count on high quality, high efficiency Comfortmaker products and your local dealer to make your home a castle filled with comfort.



Pairing your new Comfortmaker gas furnace with a Comfortmaker central air conditioner and matching indoor coil provides you with total year-round comfort and maximizes energy savings. Ask your dealer for complete details today!

All systems tested and listed by the
appropriate testing agencies.



WHEN YOU WANT
HIGH QUALITY HOME COMFORT,
ASK FOR IT BY NAME.

Comfortmaker
Air Conditioning & Heating

FOR A COMPLETE
LIST OF QUALIFIED
LOCAL DEALERS

K 524

7-10

9/28/24

PLUMBING & MECHANICAL CHECK LIST

9-30-
CA

TECHNICAL SECTION INCOMPLETE

PLUMBER'S IDENTIFICATION & SEAL

ISOMETRIC SKETCH

LIST OF EXISTING FIXTURES

GAS PIPING (LENGTH OF RUN - SIZING - APPLIANCE RATINGS)

SIZE OF EXISTING HEATING UNIT

BROCHURE FOR NEW HEATING UNIT

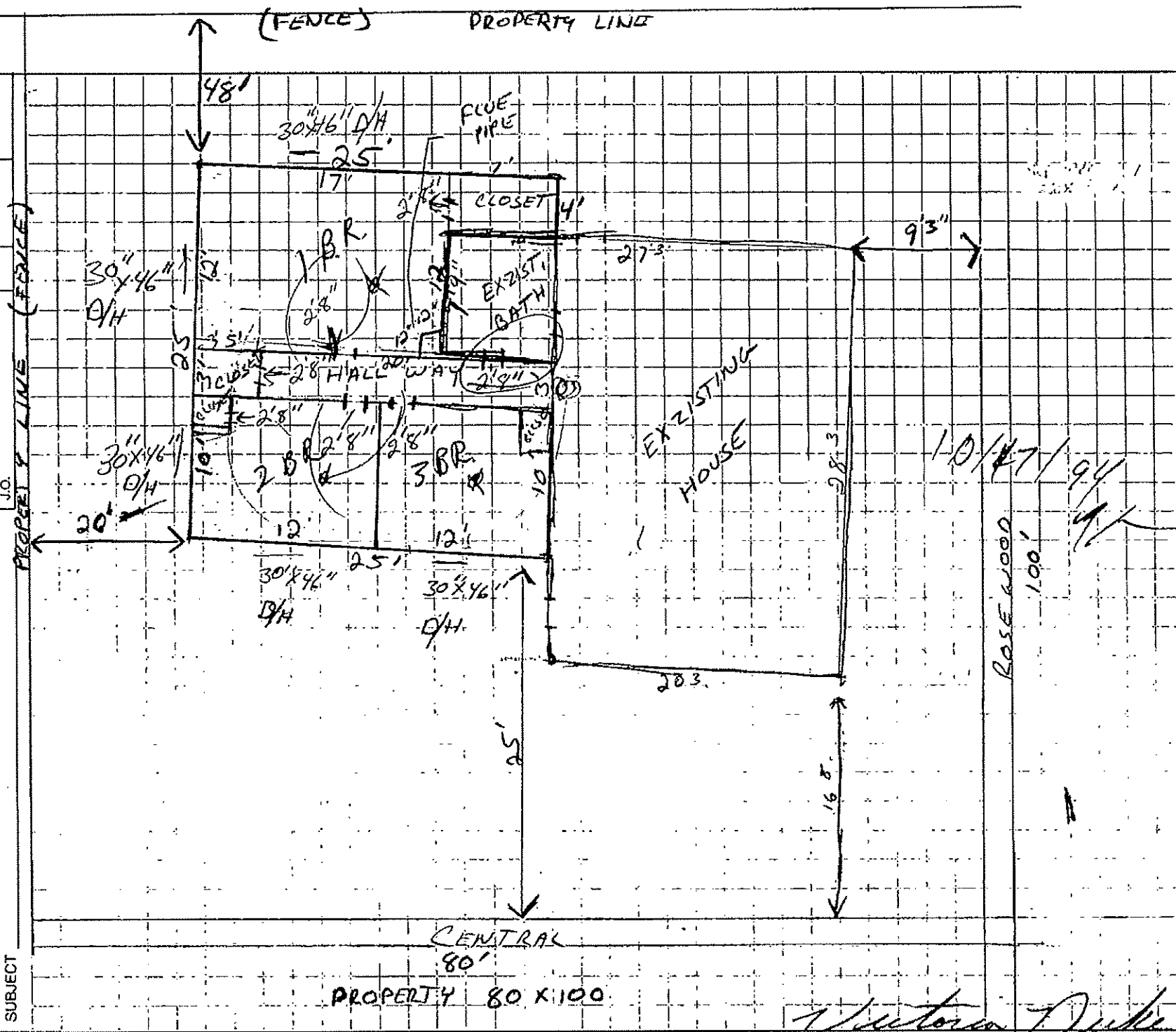
HEAT LOSS SURVEY

BARRIER-FREE CODE REQUIREMENTS

OTHER

PROJECT

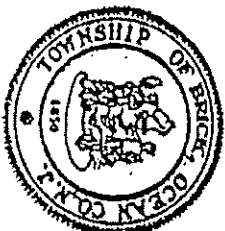
SUBJECT



" FLOOR PLAN "

Victoria Duke

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



Steven J. Zhoyan, Mayor

Township Council:

Thomas G. Maione, President
Albert Chrobocinski
Andrew R. Ciesla
Helen Fayad
Lee Hartman
Warren H. Wolf
David W. Wolfe

Department of Engineering

Municipal Engineer
(908) 477-3000, Ext. 273

TO: Municipal Engineer

DATE: Sept 22 1994

I Paradee Duke of 445 Central Ave
(Name Please Print) (Address)

The property _____ is located _____ in a flood zone.
_____ is not located _____

BLOCK: 30 LOT: 78, 9, 10

Request to be exempted from the plot plan requirement as outlined in the Brick Land Use Book, Chapter 190.31, part B.

Phone No. [REDACTED] Signed by Applicant [Signature]

1. Submit survey showing location of addition with proposed dimensions, grading. If driveway is being added, show type, width and length.

2. Proof that the property is not located in a Flood Hazard Area.

NOTE: Any excavations to be removed from the Township requires a mining permit.

Approved Date: _____ By _____

Rejected Date: _____ By _____

Remarks: _____

190-31. Plot Plan (Added 12-28-80 by Ord. No. 354-2P-80;
amended 6-12-84 by Ord. No. 354-2XXX-84)

A. Except where approval has been obtained after application under Part 3 or 4 of this chapter, no principal building or addition to a principal building shall be constructed in the Township of Brick except after approval by the Township Engineer of a plot plan to be submitted in accordance with the following specifications:

(1) Such plot plan shall be a survey of the lot in question showing the existing topography of the lot and the proposed location and elevation of the building and/or addition and the proposed grading. Existing topography and proposed grading shall at a minimum, consist of elevations at the property corners and the corners of the proposed building and/or addition. In the event that there is more than a two-foot difference in lot elevations, contours at one-foot intervals shall be shown. The existing topography of the lots immediately adjacent to the lot in question and the road fronting such lot shall also be indicated on the plot plan.

(2) Such plot plan shall include the following additional information:

- (a) The width and type of pavement on the road in front of the proposed building and/or addition.
- (b) The proposed method of drainage from the property in question.
- (c) The proposed garage and first floor elevations.

(3) Plot plans must be prepared by a licensed engineer or land surveyor and shall bear his signature and seal. Surveys and topographical information certified to National Geodetic Vertical Datum must be prepared by a licensed land surveyor and shall bear his signature and seal.

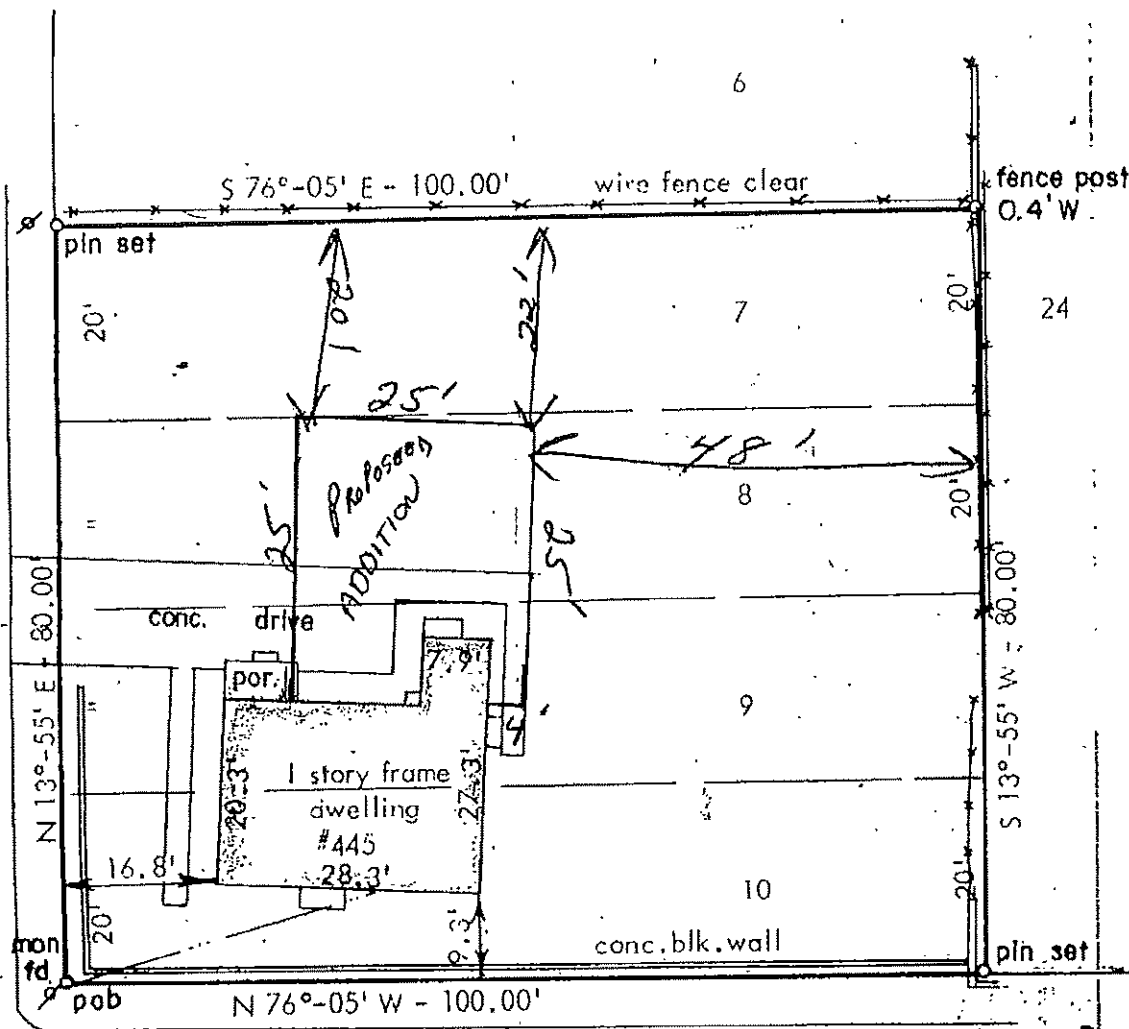
(4) Building or additions in a flood hazard area shall be in compliance with the National Flood Insurance Program (NFIP) as regulated by Federal Emergency Management Agency (FEMA).

B. Exemption from the plot plan requirement for an addition is subject to the approval of the Township Engineer, said exemption to be contingent upon:

- (1) Proof that the subject addition is not in a flood hazard area.
- (2) A survey locating the existing dwelling.
- (3) A site inspection by a Brick Township Engineering Inspector to verify that the proposed addition will not create a drainage problem.

C. Petitions for plot plan exemptions are to be made to the Township Engineer in writing.

CENTRAL AVE. (33')



BEING KNOWN AS LOTS 7, 8, 9 AND 10,
BLOCK 30 AS SHOWN ON MAP ENTITLED,
" CEDARWOOD PARK, SUBDIVISION C-
ANNEX", BRICK TOWNSHIP, OCEAN CO., N.
DATED AUGUST 22, 1929 AND FILED IN
THE OCEAN COUNTY CLERK'S OFFICE
ON APRIL 15, 1942 AS MAP NO. B-315..

ROSEWOOD

AVE. (33')

SURVEY OF PROPERTY

BRICK TOWNSHIP
SCALE 1" = 20'

OCEAN COUNTY N.J.
APRIL 12, 1989
LIC. NO. 18106

WALTER J. PARTINGTON
LICENSED LAND SURVEYOR

OFFSET DIMENSIONS FROM STRUCTURES
TO PROPERTY LINES SHOWN HEREON ARE
NOT TO BE USED FOR ESTABLISHING
PROPERTY LINES.

This certification is made only in named parties for purchase and/or mort-
gage of herein delineated property by named purchaser. No responsibility
or liability is assumed by Surveyor for use of survey for any other purpose

CERTIFIED TO: RUDOLF H. DUKE, JR. &
VICTORIA DUKE, HIS WIFE, RONALD KING
AND BARBARA KING, AS MORTGAGEES,
COMMONWEALTH LAND TITLE INSURANCE
COMPANY & SAMUEL M. MORRIS, ESQ.

APPLICANT

RENOLFE - DOKE

LOCATION:

LOT 789210 BLOCK 30

STREET

CLYDEMAN

SECTION

4000

TYPE:

ADDITION

PERMIT #

TYPE ROOFING

Asphalt Shingle

RAFTER SIZE AND SPACING

12x6 16" O.C.

ROOF SHEETING

1/2 Ply CDX

Ceiling JOIST SIZE AND SPACING

2x6 16" O.C.

TYPE SIDING

W/VL

WALL SHEETING

Plywood 1/2 CDX

TYPE WINDOWS

HURD

WALL FRAMING SIZE AND SPACING

2x4 16" O.C.

CEILING INSULATION

-R 30

WALL INSULATION

-R 13

FLOOR INSULATION

-R 19

SUB-FLOOR

3/4" Plywood

FLOOR JOIST SIZE AND SPACING

2x8 16" O.C.

BINDER

2x8

RIDDING

54x3 S.PACE

WEEPLATE

2x6 CCA

WEBSITE SHIELD

Sill Sealer

WALL FOUNDATION

8" x 16"

FOOTING

8' x 16"

32" deep footing

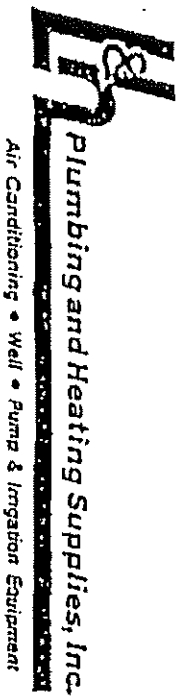


ANCHORED BOLTS

18" min.

Grade

12 1/2" x 12" Rods



MAIN OFFICE:
190 ORCHARD AVENUE N.
LAKEWOOD, NEW JERSEY 08701
FAX # (908) 905-9078
(908) 905-1009

Dear Customer:

Enclosed is the Load Calculation Report you requested. L&H Plumbing and Heating Supplies, Inc. is happy to provide this as a service to you, our valued customer.

This report was prepared using A.C.C.A. Manual-J 7th edition data, an approved industry standard for residential load applications. As such, we feel confident that the results in this report are as accurate as is reasonably possible.

If you have any questions regarding this report or need any other assistance, please feel free to contact L&H Plumbing and Heating Supplies' Technical Services Department at 908/905-1000.

Thank you for your continued patronage.

Sincerely,

L&H Plumbing and Heating Supplies, Inc.
Technical Services Staff

*Computed results are estimates, since building construction
and operating conditions are subject to variation.*

25 Cooper Road
Middletown, N.J. 07701
(908) 536-7200

401 Main Street
Awood, N.J. 07717
(908) 775-5270

820 Route 22
Brookview, N.J. 08007
(908) 775-0565

737 Route 9
Forrest River, N.J. 08731
(609) 683-2677

621 Black Horse Pike
Washington, N.J. 08034
(609) 625-5005

S/N 2453

RIGHT-J SHORT FORM

10/05/94

Job #: 229547/RUDY DUKE
For: FIGNER, WILLIAM C. (F304)

1251 CAPSTAN DRIVE
FORKED RIVER

NJ 08731

Outside db Htg Ctg
 0 95
Inside db 70 75
Design TD 70 20
Daily Range - M
Inside Humid. - 50
Grains Water - 31

By: L & H PLUMBING & HEATING SUPPLIES INC.
190 OBERLIN AVE. NORTH
LAKEWOOD
(908)905-1005

NJ 08701

Const. Quality a
of Fireplaces 0

HEATING EQUIPMENT

COOLING EQUIPMENT

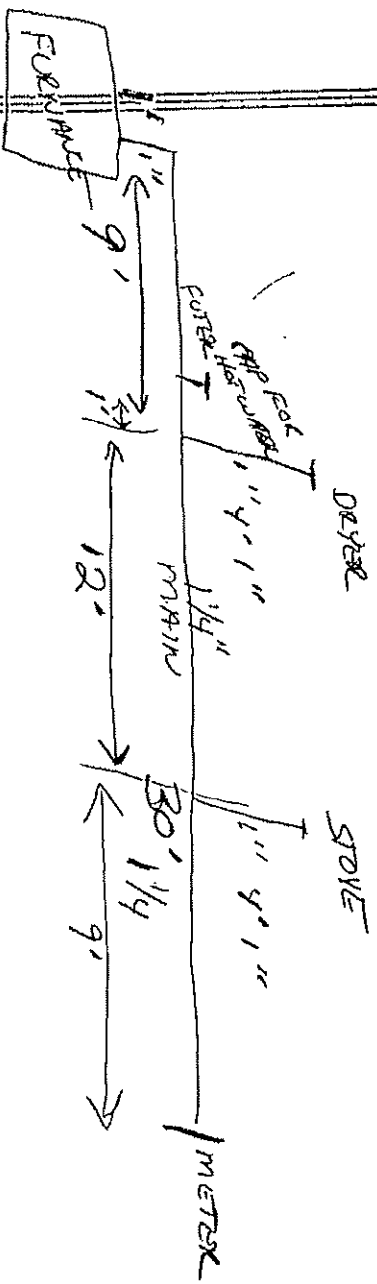
Make	COMFORTMAKER, BURNHAM	Make	COMFORTMAKER OR AIR PRO
Model	WEIL McLAIN, SLANT FIN	Model	
Type	OR AIR PRO.	Type	10.0 S.E.E.R. MIN.
Efficiency / HSPF	0.0	COP/EER/SEER	0.0
Heating Input	0 Btuh	Sensible Cooling	0 Btuh
Heating Output	0 Btuh	Latent Cooling	0 Btuh
Heating Temp Rise	0 Deg F	Total Cooling	0 Btuh
Actual Heating Fan	920 CFM	Actual Cooling Fan	920 CFM
Htg Air Flow Factor	0.024 CFM/Btuh	Clg Air Flow Factor	0.040 CFM/Btuh

Space Thermostat HONEYWELL

Load Sensible Heat Ratio 88

ROOM	NAME	AREA	HTG	CLG	HTG	CLG
		SQ.FT.	BTUH	BTUH	CFM	CFM
MAS BED		216	5944	2739	145	109
MAS CLOSET		35	819	267	20	11
BATH		64	344	107	8	4
KITCHEN		156	5062	3526	124	140
ROOM ?		72	4532	2532	111	100
LIVING ROOM		378	12660	9723	310	385
BED 3		88	2658	1689	65	67
BED 2		120	5038	2440	123	97
HALLWAY/CLOSET		75	533	177	13	7
Entire House		1204	37589	23200	920	920
Ventilation Air			0	0		
Equip. @ 1.00 RSH				23200		
Latent Cooling				3075		
TOTALS		1204	37589	26275	920	920

445 CENTRAL AVE



30' 1/4 MAIN

30'

Whitson Duke

Raytheon
Engineers & ConstructorsGENERAL
COMPUTATION
SHEET

PROJECT _____

SUBJECT _____

CALCULATION SET NO.			REV.	COMP. BY	CHKD BY
PRELIM.	FINAL	VOID	0	DATE	DATE
SHEET _____ OF _____			DATE	DATE	DATE

Heat Loss Survey

① Catalog Specifications

② GAS : piping Black pipe

Length 30' x 1 1/4"

Size 1 1/4" main with 1" Reducers

③ Appliances Rating

Dry's Input BTU's / HR 18,000

Stove Input BTU's / HR 41,000

Furnace Input BTU's / HR 100,000

1" FEEDER LINE

TO FURNACE, STOVE & DRYER.

APPENDIX

ROOSEVELT - DOKE

LOCUTION:

789210 BLOCK

518-04

25727124.

NOTES

2004
4000

TYPE:

ADDITION

Prayer

TYPE ROOSTING

Asphalt Strip Shingles

PLATE SIZE AND SPACING

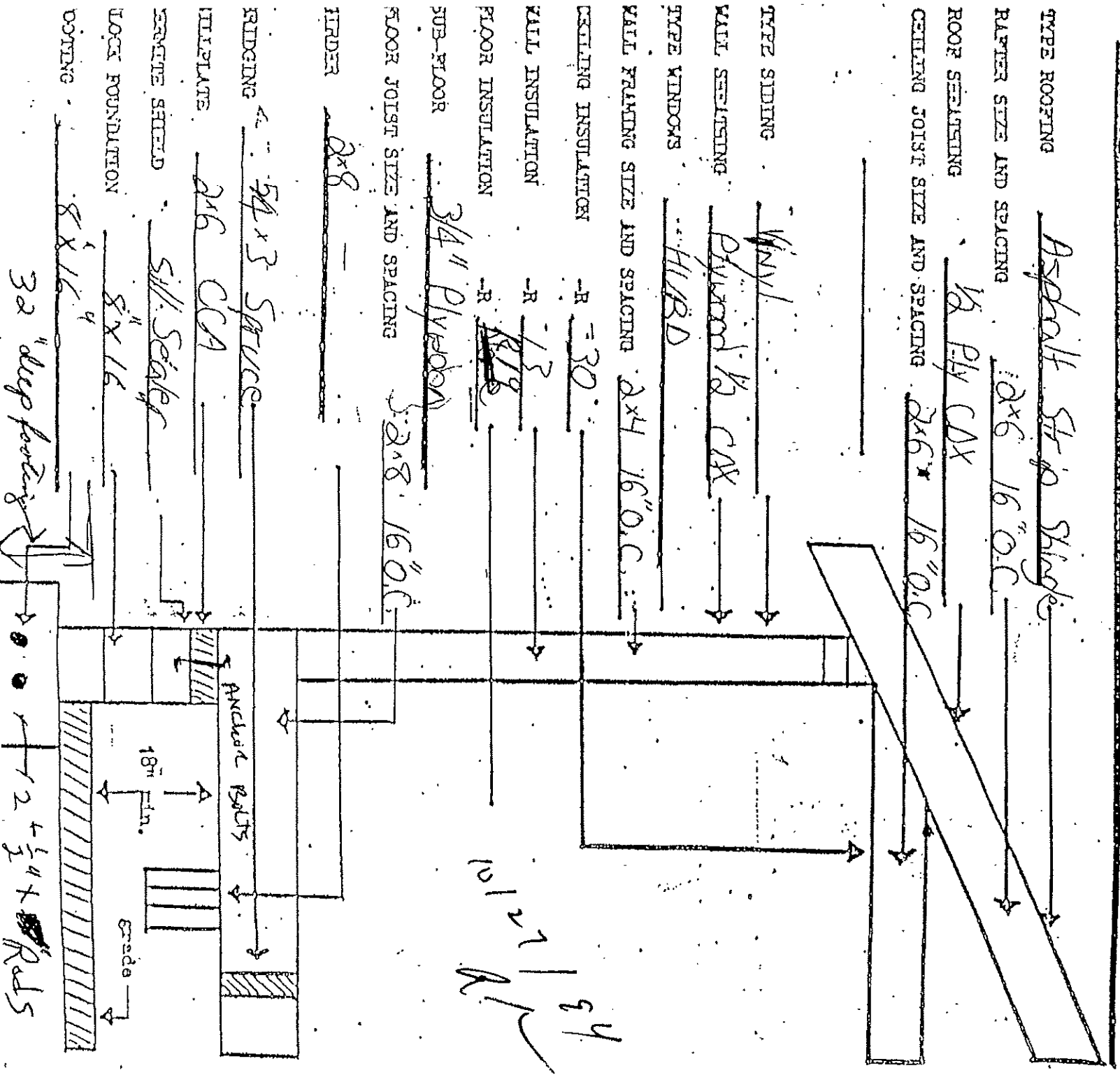
2+6/600

ROOF SEALING

1/2 Ply CAX

CONTING FOLIST SIZE AND SPACING

2x6" / 6" O.C.



Raytheon
 Engineers & Constructors

 GENERAL
 COMPUTATION
 SHEET

PROJECT _____

SUBJECT _____

CALCULATION SET NO.

PRELIM.

FINAL

VOID

SHEET

OF

J.O.

REV.

0

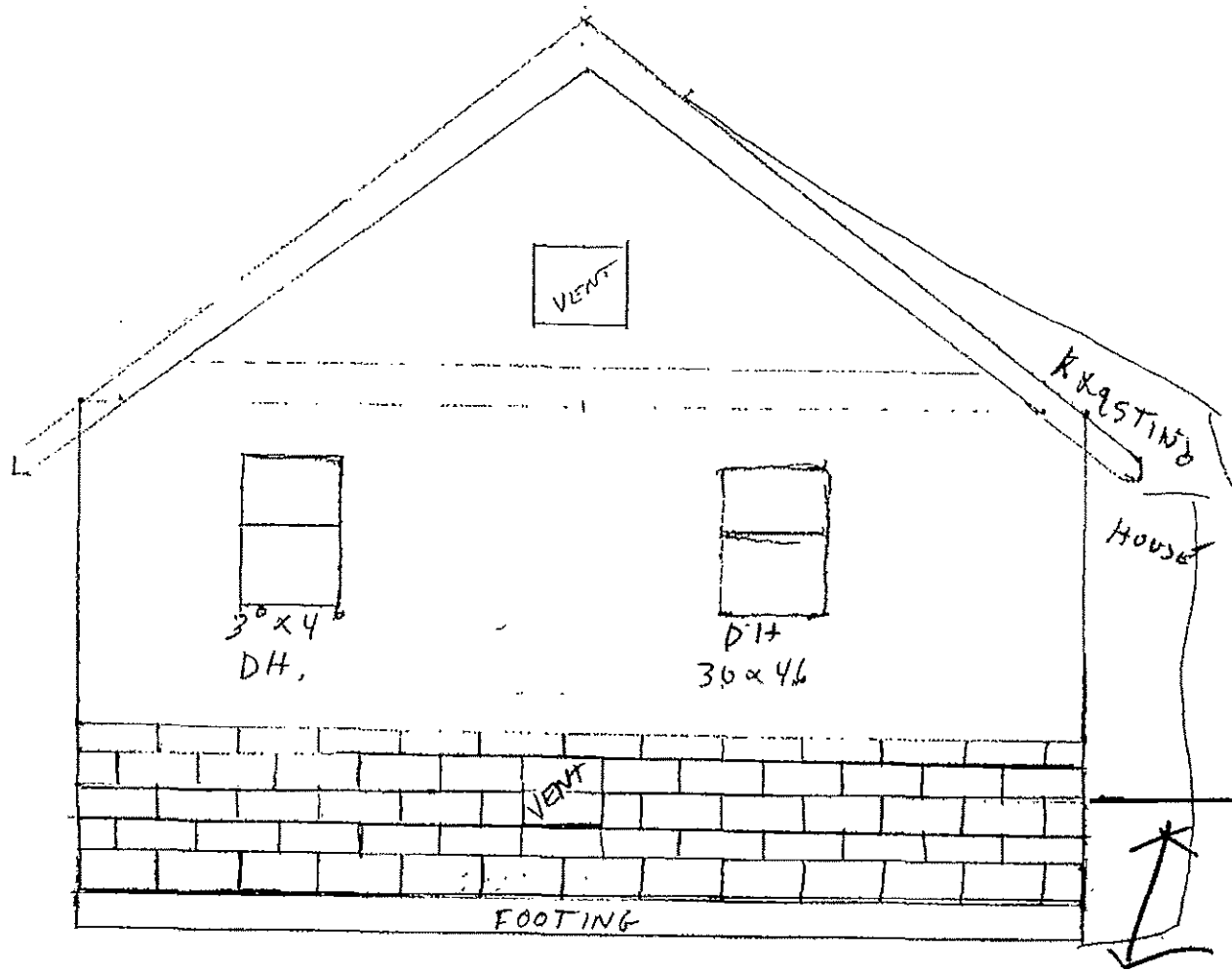
COMP. BY

DATE

CHK'D BY

DATE

SIDE VIEW


Victor Duke

Raytheon
 Engineers & Constructors

 GENERAL
 COMPUTATION
 SHEET

PROJECT _____

SUBJECT _____

CALCULATION SET NO.

PRELIM.

FINAL

VOID

SHEET

OF

J.O.

REV.

0

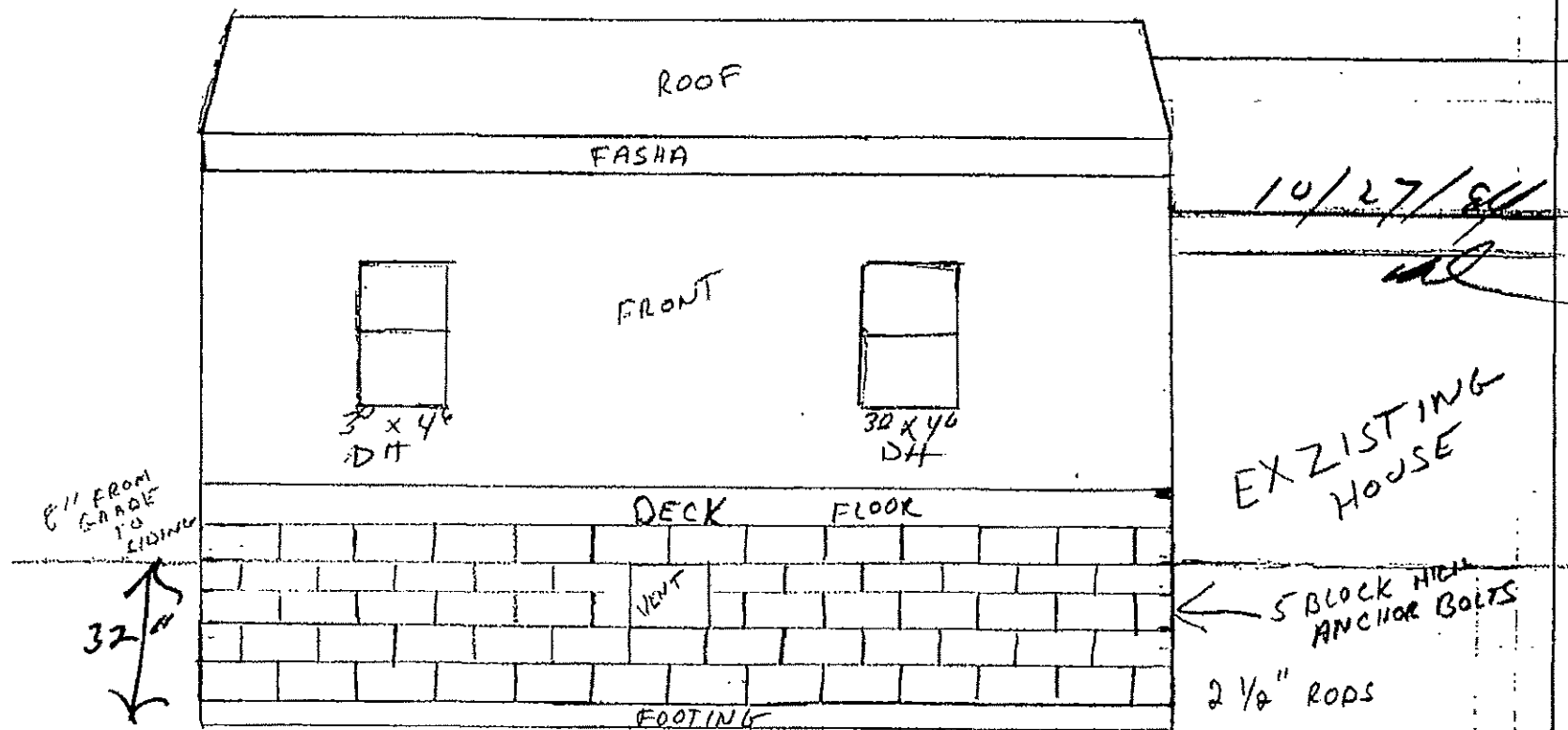
COMP. BY

DATE

CHK'D BY

DATE

FRONT VIEW


Victoria Dube

Raytheon
Engineers & Constructors

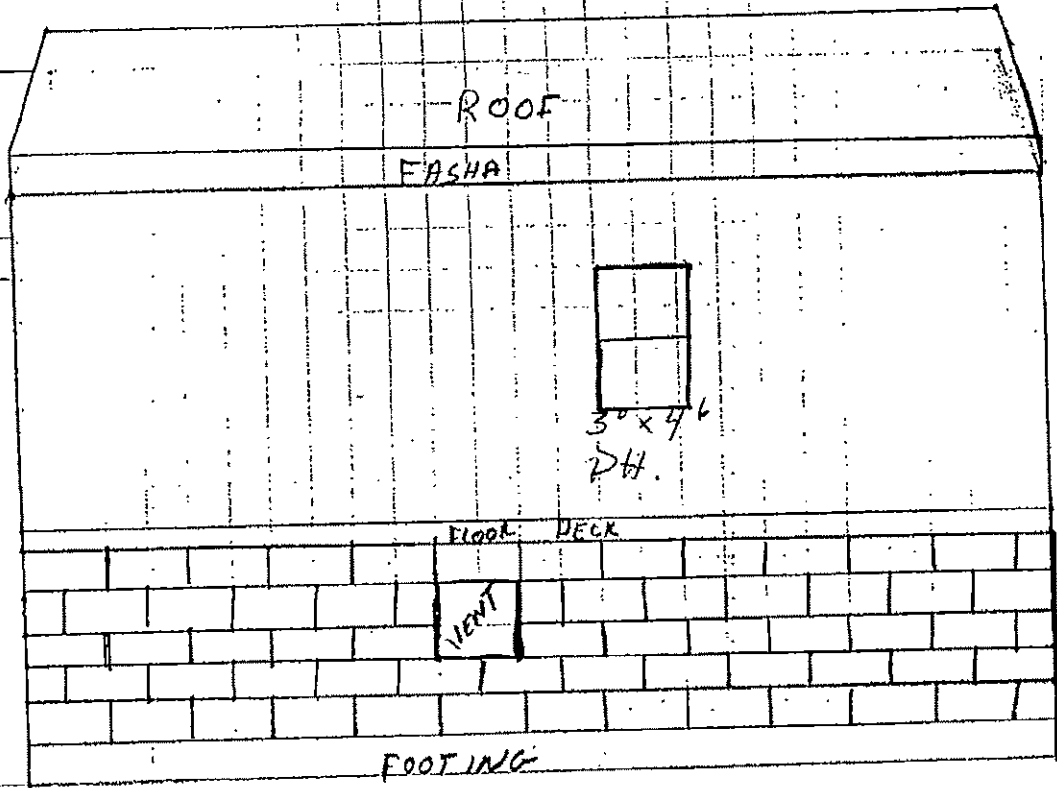
GENERAL
COMPUTATION
SHEET

PROJECT _____

SUBJECT _____

CALCULATION SET NO.			REV.	COMP. BY	CHK'D BY
PRELIM.	FINAL	VOIC	0	DATE	DATE
SHEET		OF	DATE		
J.D.					

EXISTING
HOUSE



BACK VIEW

Victor Duke

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(f) 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 *Stanley E. Engel* Date 5-13-09

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 NJR Home Services
Address 1415 Wyckoff Rd, Wall NJ 07719 Exp. Date 6/2009
License No. [REDACTED]
Federal Employee No. [REDACTED]

Telephone [REDACTED]
Signature WALTER TULECKI Fax 732-938-3010
Tel. 732-919-8172

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

OFFICE DATE RECEIVED:

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

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

Name of Code & Edition

Building	_____
Electrical	_____
Plumbing	_____
Fire Protection	_____
Mechanical	_____
Energy	_____
Barrier Free	_____
Flood Hazard	_____
As Built Elevation Cert.	_____
Other	_____

X. CERTIFICATES ISSUED (office use only)

☐ Temporary Certificate of Occupancy	No	_____	DATE ISSUED	_____	DATE EXPIRED	_____	DATE REISSUED	_____	DATE EXPIRED	_____
☐ 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	_____	_____	_____	_____	_____	_____	_____	_____	_____

Reorder From OCS Pricing

U.C.C. F100-3 (rev. 3/96)



CONSTRUCTION PERMIT

IDENTIFICATION Block: 524 Lot 4

Work Site Location: 449 CENTRAL AVE. Brick Township, NJ

Owner in Fee

ENGLERT, RICHARD & VALARIE

449 CENTRAL AVE. BRICK NJ 08723

Telephone:

Qualifier

NJR HOME SERVICES

Address 1415 WYCKOFF RD WALL TOWNSHIP NJ 07719

Telephone: 732-938-1260

Lic. No. or Bids. Reg. No.

Federal Employee. No.

Is hereby granted permission to perform the following work:

☐ BUILDING ☒ PLUMBING ☐ LEAD HAZARD ABATEMENT

☐ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION

☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☐ OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:

REPLACEMENT WATER HEATER DIRECT REPLACEMENT OF GAS WH

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 \$442

Construction Official

Date

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the regulations 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 for 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.

Date Issued

Control #

Permit #

09-001618

09-1256

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 \$0

Other \$0

Total \$41

Check No. \$0

Cash \$0

Credit \$0

Collected By

XX01 SERV.001

\$40.00

\$1.00

\$-4.1-00

DCA

CHECK



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 6/12/2009
Control Number C-09-001618
Permit Number 09-1256
Permit Issue Date 6/1/2009
Certificate Number 09-1256

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 449 CENTRAL AVE. Brick Township, NJ Block: 524 Lot: 4 Qual: _____
Owner in Fee: ENGLERT, RICHARD & VALARIE
Owner Address: 449 CENTRAL AVE. BRICK NJ 08723
Telephone: _____
Contractor: NJR PLUMBING SERVICES
Address: 1415 WYCKOFF RD. WALL NJ 07719
Telephone: _____ 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: REPLACEMENT WATER HEATER DIRECT REPLACEMENT OF GAS WH

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 NDACS: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: 6/12/2009

U.C.C. F250 (rev. 08/05)

Page 1



PERMIT

Block Lot Appli. code

Mailed To: BRICK TWP 401 CHAMBERS BRIDGE RD BRICK NJ 08723

Total Due: \$

Customer:



PLUMBING SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

09-1256
6/1/09

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

Block 524 Lot 4 Qualification Code _____

Work Site Location 449 Central Av

Brick

Owner in Fee: Richard Englert

Tel. () e-mail _____

Address _____

Contractor: NJR PLUMBING SERVICES Tel. (732) 938-1155

Address 1415 WYCKOFF RD e-mail _____

Contractor License No. WALL NJ 07719 Exp. Date 6/09

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

Federal Emp. ID No. FAX: (732) 938-3010

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 \$ 442.00

JOB-SUMMARY (Office Use Only)		INSPECTIONS				Dates (Month/Day)	
PLAN-REVIEW		Type	Failure	Failure	Approval	Initial	
☐ No Plans Required		Slab					
☐ Joint Plan Review Required		Rough					
☐ Building ☐ Electric		Water					
☐ Fire ☐ Elevator		Sewer					
☒ Plumbing Plans Approved		Fixtures					
Date: <u>5-19-09</u>		Gas Equipment					
Approved by: <u> </u>		Gas Piping					
SUBCODE APPROVAL		LP Gas Tank					
☐ CO ☐ CCO ☒ CA		Fuel Oil Piping					
Date: <u>6-1-09</u>		Solar					
Approved by: <u> </u>		TCO					

FINAL 06-10-09

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

DESCRIPTION OF WORK

DIRECT REPLACEMENT OF GAS HOT WATER 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	_____
<u>x</u>	Water Heater	_____
_____	Fuel Oil Piping	_____
_____	Gas Piping	_____
_____	LP Gas 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



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

Block 524 Lot 4 Qualification Code _____

Work Site Location 449 Central Av

Brick

Owner in Fee: Richard Englert

Tel. () e-mail _____

Address _____

Contractor: NJR PLUMBING SERVICES Tel. (732) 938-1155

Address 1415 WYCKOFF RD e-mail _____

Contractor License No. WALL NJ 07719 Exp. Date 6/09

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

Federal Emp. ID No. FAX: (732) 938-3010

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 \$ 442.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

Joint Plan Review Required: _____

☐ Building ☐ Electric

☐ Fire ☐ Elevator

☒ Plumbing Plans Approved

Date: 5/15/09

Approved by: _____

SUBCODE APPROVAL

☐ CO ☐ CCO ☐ CA

Date: _____

Approved by: _____

INSPECTIONS

Type:

Slab

Rough

Water

Sewer

Fixtures

Gas Equipment

Gas Piping

LPGas Tank

Fuel Oil Piping

Solar

TCO

Dates (Month/Day)

Failure Failure Approval Initial

C. CERTIFICATION IN LIEU OF OATH

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

DESCRIPTION OF WORK

DIRECT REPLACEMENT OF GAS HOT WATER 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

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 \$ _____

Reorder From OCS Printing (809) 390-1400

U.C.C. F130 (rev. 10/06)



PLUMBING SUBCODE TECHNICAL SECTION



Date Received
Control #
Date Issued
Permit #

09-1256
6/1/09

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

Block 524 Lot 4 Qualification Code _____

Work Site Location 449 Central Av

Brick

Owner in Fee: Richard Englert

Tel. (_____) e-mail _____

Address _____

Contractor: NJR PLUMBING SERVICES Tel. (732) 938-1155

Address 1415 WYCKOFF RD e-mail _____

Contractor License No. WALL NJ 07719 Exp. Date 6/09

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

Federal Emp. ID No. _____ FAX: (732) 938-3010

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 \$ 442.00

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type	Failure	Failure	Approval
☐ No Plans Required		Slab			
☐ Joint Plan Review Required		Rough			
☐ Building	☐ Electric	Water			
☐ Fire	☐ Elevator	Sewer			
☒ Plumbing Plans Approved		Fixtures			
Date: _____		Gas Equipment			
Approved by: _____		Gas Piping			
SUBCODE APPROVAL		LPGas Tank			
☐ CO	☐ CCO	Fuel Oil Piping			
Date: _____		Solar			
Approved by: _____		TCO			

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

DIRECT REPLACEMENT OF GAS HOT WATER 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	_____
_____	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 \$ _____



CHIMNEY CERTIFICATION FOR REPLACEMENT OF FUEL FIRED EQUIPMENT

BLOCK 524

LOT 4

PERMIT # _____

WORK SITE ADDRESS 4419 Central Ave

Applicant _____

Certifying Individual Richard Engert Company ASE Home Services

Address 1415 Winkett Rd City Wali State US Zip Code 07719

Tel. () _____

Check the Appropriate Box

Type of Replacement:

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

Existing Vent/Chimney:

- ☐ 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 hereby 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 [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.

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER, WITH A MULTI-COLORED
BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

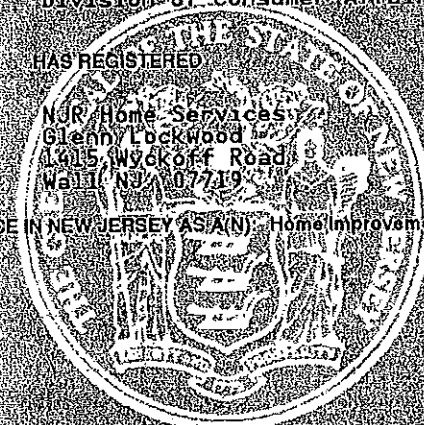
NOT AN
ELECTRICIAN'S
OR PLUMBER'S
LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs
HAS REGISTERED

NJR Home Services
Glenn Lockwood
1415 Wyckoff Road
Wall NJ 07719

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



11/25/2008 TO 12/31/2009

VALID

LICENSE REGISTRATION CERTIFICATION

Signature of Licensee/Registrant/Certificate Holder

DIRECTOR

BLOCK 524 LOT 4 QUALIFICATION CODE _____ ADDRESS (SITE) 449 Central Ave PERMIT NO. 18-3104



CONSTRUCTION PERMIT APPLICATION

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

C-18-004112

I. IDENTIFICATION

1. Proposed Work Site at: 449 Central Ave

2. Name of Owner in Fee: Richard Englert

3. Ownership in Fee: Public Private

4. Principal Contractor: NJR Home Services Tel. ()

1415 Wyckoff Rd., Wall NJ 07719
Tel. 1.877.466.3657 Fax. 732-938-3010
Contractor License No. 13VH00361500
HVACR License No. 19HC00366400
Federal Employee No. 22-3609806

5. FRANK CASEY TEL. 732-919-8090

6. Responsible Person in Charge once Work has Begun

V. FEE SUMMARY (for office use only)		Update	Update
1. Building	\$		
2. Electrical	\$		
3. Plumbing	\$		
4. Fire Protection	\$		
5. Elevator-Devices-Mechanical	\$		
6. Subtotal	\$		
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
9. State Permit Surcharge Fee	\$		
10. Subtotal	\$		
11. 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. 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)

- ☐ Building
- ☐ Electrical
- ☐ Plumbing
- ☐ Fire Protection
- ☐ Elevator

TOTAL COST

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer

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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm

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(f)1.k:

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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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.

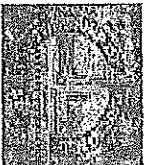
NJR Home Services
1415 Wycliff Rd., Wall NJ 07719
Tel. 1.877.466.3657 Fax: 732-938-3010
Contractor License No. 13VH00361500
HVACR License No. 19HC00366400
Federal Employee No. 22-3609806

FRANK CASEY TEL. 732-919-8090



III. ☐ **LEAD HAZARD ABATEMENT:** Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ☐ **HOME ELEVATION:** Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 11/30/2018
Control Number C-18-004112
Permit Number 18-3104
Permit Issue Date 11/7/2018
Certificate Number 18-3104

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 449 CENTRAL AVE. Brick Township, NJ Block: 524 Lot: 4 Quai:
Owner in Fee: ENGLERT, RICHARD & VALARIE
Owner Address: 449 CENTRAL AVE. BRICK NJ 08723
Telephone: [REDACTED]
Contractor NJR HOME SERVICES
Address 1415 WYCKOFF ROAD WALL NJ 07719
Telephone: (877) 466-3657 Fax: (732) 938-3010
License Number or Builders Registration Number: Federal Emp. Number: 22-3609806
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 A/C - & A/R HANDLER

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 5:1.7

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 (year(s); 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 (year(s); 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: 11/30/2018

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

Fee: \$0.00

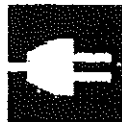
Check Number:

Collected By:

Page 1



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 524 Lot 4 Qualification Code _____
Work Site Location 449 CENTRAL AV, Brick, NJ 08723

Owner In Fee ENGLERT, RICHARD

Tel. () e-mail

Address 449 CENTRAL AVE 08723

Contractor NJR HOME SERVICES Tel. (732) 938-1105

Address 1415 WYCKOFF RD. e-mail NJRHSpermits@NJResources.com

WALL TOWNSHIP, NJ 07719

Contractor License No. or Builder Registration No. 34EB01231200 Exp. Date 03/18

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH00361500

Federal Emp. ID No. 22-3609806 FAX (732) 938-3010

B. ELECTRICAL CHARACTERISTICS

Use Group: Present: ☒ Proposed: _____

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as _____ Utility Co. _____

Estimated Cost of Elec. Work \$ 3032.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

☐ Partial - Underslab Utilities Approved

Date: _____ Approved By: _____

☐ Electric Plans Approved

Date: _____ Approved By: _____

Joint Plan Review Required:

☐ Bldg. ☐ Plumb. ☐ Fire. ☐ Elev.

SUBCODE APPROVAL for PERMIT

Date: _____

Approved By: _____

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☒ CA ☐ CCO

Date: 11/28/18

Approved By: [Signature]

INSPECTIONS

Type: Failure Failure Approval Initial

Rough _____

Barrier-Free _____

Trench _____

Temp. Serv. _____

Constr. Serv. _____

TCO _____

Other _____

Service _____

Final _____

Barrier-Free _____

Temp. Cut-in-Card Date Issued _____

Final Cut-in-Card Date Issued _____

Annual Pool Inspection _____

Date of Grounding and Bonding Certification _____

11-28-18

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of the premises and authorize this application and perform the work listed on this application.

Applicant sign/Contractor sign and seal here:

Print name here: Daniel J. Neary

☒ Licensed Elec. Contractor ☐ Certified Electrical Technician Certificate Exempt

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: DIRECT REPLACEMENT OF CENTRAL AC & AIRHANDLER

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors-Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	\$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/REceptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
<u>1</u>	<u>2.37</u>	<u>HP/KW Space Heater/Air Handler</u>	
<u>1</u>		KW Baseboard Heat	
		HP Motors 1/+HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

To Reorder Call:
Allegra Marketing, Print & Mail
(609)-390-1400

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



MECHANICAL INSPECTOR TECHNICAL SECTION



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

Block 524 Lot 4 Qualification Code _____
Work Site Location 449 CENTRAL AV, Brick, NJ 08723
Owner In Fee ENGLERT, RICHARD
Tel. () e-mail _____
Address 449 CENTRAL AVE

Contractor NJR HOME SERVICES Tel. (732) 919-8090
Address 1415 WYCKOFF RD., WALL TOWNSHIP, NJ 07719 e-mail NJRHSpermits@NJResources.com
Contractor License No. or Builder Registration No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH00361500

Federal Emp. ID No. 22-3609806 FAX (732) 938-3010

B. MECHANICAL CHARACTERISTICS

Use Group: Present: R-3, R-4 or R-5(circle one) Proposed: R-3, R-4 or R-5(circle one)
Heating System Work: ☐ New OR ☐ Modification to Existing OR ☐ Conversion OR ☐ Replacement

Type: ☐ Hydronic ☐ Hot Air

Fuel Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar ☐ Other _____

Estimated Cost of Mechanical Work \$ 3032.00

JOB SUMMARY (Office Use Only)		INSPECTIONS		DATES	
PLAN REVIEW		Type:	Failure	Failure	Approval Initial
☐ No Plans Required		Gas Piping	_____	_____	_____
☐ Mechanical Plans Approved		Appliance	_____	_____	_____
Date: _____	Approved By: _____	Chimney/Vent	_____	_____	_____
☐ Fire Protection Plans Approved		Oil Piping	_____	_____	_____
Date: _____	Approved By: _____	Oil Tank	_____	_____	_____
Joint Plan Review Required:		LPG Tank	_____	_____	_____
☐ Bldg. ☐ Elec. ☐ Plumb. ☐ Fire.		Hydronic Piping	_____	_____	_____
☐ Elev.		Fireplace	_____	_____	_____
SUBCODE APPRVAL for PERMIT		Chimney Cert.	_____	_____	_____
Date: _____	Approved By: _____	Other <u>Fire</u>	_____	_____	_____
SUBCODE APPROVAL for CERTIFICATE					
☐ CA ☐ CCO					
Date: <u>11-28-18</u>	Approved By: _____				

Date Received 11/7/18

Control # _____

Date _____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of owner or not) and am authorized to make this application.

Sign here: _____

Print name here: Frank Casey

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

DIRECT REPLACEMENT OF CENTRAL AC & AIRHANDLER

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Heater	\$ _____
	Fuel Oil Piping Connections	_____
	Gas Piping Connections	_____
	Steam Boiler	_____
	Hot Water Boiler	_____
	Hot Air Furnace	_____
	Oil Tank	_____
	LPG Tank	_____
1	~~Fireplace~~ AIRHANDLER	_____
1	~~Other~~ CENTRAL AC	_____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____



ELECTRICAL SUBCODE TECHNICAL SECTION



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

Block 524 Lot 4 Qualification Code _____

Work Site Location 449 CENTRAL AV, Brick, NJ 08723

Owner In Fee ENGLERT, RICHARD

Tel. () e-mail _____

Address 449 CENTRAL AVE 08723

Contractor NJR HOME SERVICES Tel. (732) 938-1105

Address 1415 WYCKOFF RD. e-mail NJRHSpermits@NJResources.com

WALL TOWNSHIP, NJ 07719

Contractor License No. or Builder Registration No. 34EB01231200 Exp. Date 03/18

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH00361500

Federal Emp. ID No. 22-3609806 FAX (732) 938-3010

B. ELECTRICAL CHARACTERISTICS

Use Group: Present: ☒ Proposed: _____

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as _____ Utility Co. _____

Estimated Cost of Elec. Work \$ 3032.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☐ No Plans Required

☐ Partial - Underslab Utilities Approved

Date: _____ Approved By: _____

☐ Electric Plans Approved

Date: _____ Approved By: _____

Joint Plan Review Required:

☐ Bldg. ☐ Plumb. ☐ Fire. ☐ Elev.

SUBCODE APPRVAL for PERMIT

Date: _____

Approved By: _____

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☐ CA ☐ CCO

Date: _____

Approved By: _____

INSPECTIONS

Type: _____ Dates(Month/Day) _____

Rough _____ Failure _____ Approval _____ Initial _____

Barrier-Free _____

Trench _____

Temp. Serv. _____

Constr. Serv. _____

TCO _____

Other _____

Service _____

Final _____

Barrier-Free _____

Temp. Cut-In-Card Date Issued _____

Final Cut-In-Card Date Issued _____

Annual Pool Inspection _____

Date of Grounding and Bonding _____

Certification _____

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor

sign and seal here:

Print name here: Daniel J. Neary

☒ Licensed Elec. Contractor ☐ Certifd Landscape Irrigation Contr ☐ Exempt

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: DIRECT REPLACEMENT OF CENTRAL AC & AIRHANDLER

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors-Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	\$ _____
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/REceptacle	
		KW Dishwasher	
		HP Garbage Disposal	
1	2.37	KW Central A/C Unit	
1		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

To Reorder Call:
Allegra Marketing, Print & Mail
(609)-390-1400

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



CONSTRUCTION PERMIT

Date Issued

Permit#

IDENTIFICATION: Block 524 Lot 4 Qualification Code _____
Work site Location 449 CENTRAL AV, Brick, NJ 08723
Owner in Fee ENGLERT, RICHARD Contractor NJR HOME SERVICES
Address 449 CENTRAL AVE Address 1415 WYCKOFF RD., WALL TOWNSHIP, NJ 07719
Tel. () Tel. (732) 919-8090
Lic. No. or Bids. Reg. No. 13VH00361500
22-3609806

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:

DIRECT REPLACEMENT OF CENTRAL AC & AIRHANDLER

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

Estimated Cost of work \$6,085.00

Construction Official

Date

UCC F170 (rev. 01/04) For reorder: Call Allegra-Marketing-Print-Mail (609) 390-1400

1 WHITE-INSPECTOR

2 CANARY-OFFICE

3 PINK-TAX ASSESSOR

4 GOLD-APPLICANT

(see reverse side)

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 _____

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 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 given.

- ☐ 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 the case of pile foundations, inspections shall be made in accordance with the requirements of the buildings subcode.
 2. Foundation and all walls up to grade level prior to back filling.
 3. Utility services, including septic.
 4. 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.
- ☐ 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.

Job: 4
Bel: 524

RESIDENTIAL REPLACEMENT OF FURNACE/BOILER
(IN LIEU OF MANUALS)

BOILER REPLACEMENT

OLD BTU INPUT _____ OUTPUT _____ I=B+R OUTPUT _____
NEW BTU INPUT _____ OUTPUT _____ OUTPUT _____

FURNACE REPLACEMENT

_____ OLD BTU INPUT _____ OUTPUT _____
NEW BTU INPUT _____ OUTPUT _____

A/C REPLACEMENT

OLD UNIT 2 ~~BEU~~ / 100
NEW UNIT 2 ~~BEU~~ / 100

AND/OR

HEAT LOSS/HEAT GAIN

IF YOU DON'T HAVE OLD UNIT SPECIFICATIONS, YOU WILL HAVE TO
SUBMIT A HEAT LOSS/HEAT GAIN (MANUAL & MANUALS)

IF THE NEW UNIT BTU IS LESS THAN THE OLD UNIT BTU YOU WILL HAVE
TO SUBMIT A HEAT LOSS/HEAT GAIN

WE ALSO WILL NEED
COPY OF THE BROCHURE/SPECS OF THE NEW FURNACE/BOILER /AC UNIT
(NOT THE INSTALLATION GUIDE)

CHIMNEY CERTIFICATION (CANNOT BE CERTIFIED BY
HOMEOWNER)

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Board of Exam. of HVACR Contractors

HAS LICENSED

Francis J. Casey
1415 Wyckoff Rd
Wall NJ 07719

FOR PRACTICE IN NEW JERSEY AS A(N): Master HVACR Contractor

09/18/2018 TO 06/30/2020

VALID

19HC00366400

LICENSE REGISTRATION NUMBER



Signature of Licensed Registrant/Endorser Holder



ACTIVE DATE 7/1/20

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER, WITH A MULTI-COLORED
BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY

NOTARY
ELECTRICIAN'S
OR PLUMBER'S
LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

HAS REGISTERED

NJR HOME SERVICES COMPANY
Frank Casey, Manager-NJRH Operations
1415 Wyckoff Road
Wall NJ 07719

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

03/08/2018 TO 03/31/2019

VALID

13VH00361500E

LICENSE/REGISTRATION/CERTIFICATION

Francis Casey
Signature of Licensee/Registrant/Certificate Holder

Shirley J. [Signature]
ACTING DIRECTOR



CONSTRUCTION PERMIT

IDENTIFICATION Block: 524 Lot: 4

Work Site Location: 449 CENTRAL AVE., Brick Township, NJ

Owner in Fee

ENGLERT, RICHARD & VALARIE

449 CENTRAL AVE. BRICK NJ 08723

Telephone:

Qualifier

Contractor

Address

NJR HOME SERVICES
1415 WYCKOFF ROAD WALL NJ 07719

Telephone: (877) 468-3857

Lic. No. or Bldrs. Reg. No. 19H000366400 13VH00361500

Federal Employee. No. 22-3609888

Is hereby granted permission to perform the following work:

☐ BUILDING ☐ PLUMBING ☐ LEAD HAZARD ABATEMENT

☒ ELECTRICAL ☐ FIRE PROTECTION ☐ DEMOLITION

☐ ELEVATOR DEVICES ☐ ASBESTOS ABATEMENT ☒ OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:

REPLACEMENT A/C & AIR HANDLER

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 \$6,064

Construction Official

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations, N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☒ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☐ A complete copy of released plans must be kept on the job site. If you do not understand any of this information, please ask.

Date Issued

Control # C-18-094112

Permit #

18-5101

PAYMENTS (Office Use Only)

Building \$0

Electrical \$150

Plumbing \$0

Fire Protection \$0

Elevator Devices \$0

Other \$125.00

DCA Training Fee \$12

CO Fee \$0

Other \$0

Total \$287

Check No. 4631

Cash \$0

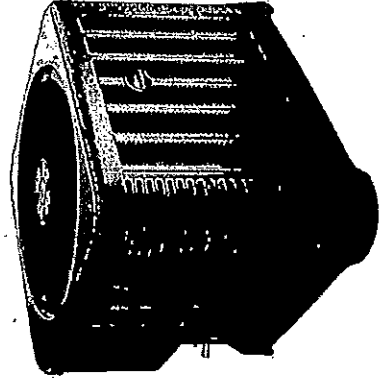
Credit \$0

Collected By TJ



Air Conditioners
RA16 Series

Ruud Achiever® Series Air Conditioners



RA16 Series

Efficiencies up to 16 SEER/13 EER

Nominal Sizes 1 1/2 to 5 Ton [5.28 to 17.6 kW]

Cooling Capacities 17.3 to 60.5 kBTU
[5.7 to 17.7 kW]



"Proper sizing and installation of equipment is critical to achieve optimal performance. Split system air conditioners and heat pumps must be matched with appropriate coil components to meet Energy Star. Ask your Contractor for details or visit www.energystar.gov."

- New composite base pan – dampens sound, captures louver panels, eliminates corrosion and reduces number of fasteners needed
- Powder coat paint system – for a long lasting professional finish
- Scroll compressor – uses 70% fewer moving parts for higher efficiency and increased reliability
- Modern cabinet aesthetics – increased curb appeal with visually appealing design
- Curved louver panels – provide ultimate coil protection, enhance cabinet strength, and increased cabinet rigidity
- Optimized fan orifice – optimizes airflow and reduces unit sound
- Rust resistant screws – confirmed through 1500-hour salt spray testing
- PlusOne™ **Expanded Valve Space** – 3" 4" 5" service valve space – provides a minimum working area of 27-square inches for easier access
- PlusOne™ **Triple Service Access** – 15" wide, industry leading corner service access – makes repairs easier and faster. The two fastener removable corner allows optimal access to internal unit components. Individual louver panels come out once fastener is removed, for faster coil cleaning and easier cabinet reassembly

- Diagnostic service window with two-fastener opening – provides access to the high and low pressure.
- External gauge port access – allows easy connection of "low-loss" gauge ports
- Single-row condenser coil – makes unit lighter and allows thorough coil cleaning to maintain "out of the box" performance
- 35% fewer cabinet fasteners and fastener-free base – allow for faster access to internal components and hassle-free panel removal
- Service trays – hold fasteners or caps during service calls
- QR code – provides technical information on demand for faster service calls
- Fan motor harness with extra long wires allows unit top to be removed without disconnecting fan wire.

RELY ON RUUD.™

FORM NO. A22-222 REV. 4

TABLE OF CONTENTS

Standard Feature	3
Available SKUs	3
Features & Benefits	4-5
Model Number Identification	6-7
General Data/Electrical Data	8
Accessories	9
Weighted Sound Power	9
Thermostats	9
Unit Dimensions	10
Clearances	11
Wiring Diagrams	12
Application Guidelines	12
Refrigerant Line Size Information	13-14
Performance Data	15-43
Guide Specifications	44
Limited Warranty	45

Standard Feature Table

Feature	STANDARD FEATURES									
	18	24	30	35	42	48	60			
R-410a Refrigerant	✓	✓	✓	✓	✓	✓	✓			
Maximum SEER	16	16	16	16	16	16	16			
Maximum EER	13	13	13	13	13	13	13			
Scroll Compressor	✓	✓	✓	✓	✓	✓	✓			
Field Installed Filter Drier	✓	✓	✓	✓	✓	✓	✓			
Front Seating Service Valves	✓	✓	✓	✓	✓	✓	✓			
Internal Pressure Relief Valve	✓	✓	✓	✓	✓	✓	✓			
Internal Thermal Overload	✓	✓	✓	✓	✓	✓	✓			
Long Line capability	✓	✓	✓	✓	✓	✓	✓			
Low Ambient capability with Kit	✓	✓	✓	✓	✓	✓	✓			
3-4-5 Expanded Valve Space	✓	✓	✓	✓	✓	✓	✓			
Composite Basepan	✓	✓	✓	✓	✓	✓	✓			
2 Screw Control Box Access	✓	✓	✓	✓	✓	✓	✓			
15" Access to Internal Components	✓	✓	✓	✓	✓	✓	✓			
Quick release louver panel design	✓	✓	✓	✓	✓	✓	✓			
No fasteners to remove along bottom	✓	✓	✓	✓	✓	✓	✓			
Optimized Venturi Airflow	✓	✓	✓	✓	✓	✓	✓			
Single row condenser coil	✓	✓	✓	✓	✓	✓	✓			
Powder coated paint	✓	✓	✓	✓	✓	✓	✓			
Rust resistant screws	✓	✓	✓	✓	✓	✓	✓			
QR code	✓	✓	✓	✓	✓	✓	✓			
External gauge ports	✓	✓	✓	✓	✓	✓	✓			
Service trays	✓	✓	✓	✓	✓	✓	✓			

✓ = Standard

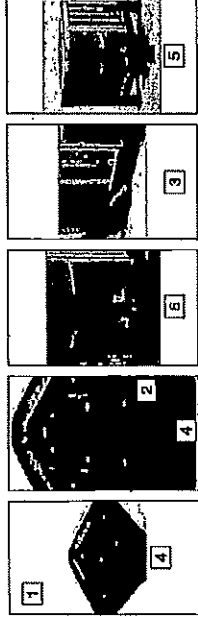
Available SKUs

Available Models	Description
RA1618AJ1NA	Achiever® Series 1 1/2 ton 16 SEER Single-Stage Air Conditioner-208/230V/1/60
RA1624AJ1NA	Achiever® Series 2 ton 16 SEER Single-Stage Air Conditioner-208/230V/1/60
RA1630AJ1NA	Achiever® Series 2 1/2 ton 16 SEER Single-Stage Air Conditioner-208/230V/1/60
RA1636BJ1NA	Achiever® Series 3 ton 16 SEER Single-Stage Air Conditioner-208/230V/1/60
RA1642AJ1NA	Achiever® Series 3 1/2 ton 16 SEER Single-Stage Air Conditioner-208/230V/1/60
RA1648AJ1NA	Achiever® Series 4 ton 16 SEER Single-Stage Air Conditioner-208/230V/1/60
RA1660AJ1NA	Achiever® Series 5 ton 16 SEER Single-Stage Air Conditioner-208/230V/1/60
RA1618AJ1NB	Achiever® Series 1 1/2 ton 16 SEER Single-Stage Air Conditioner w/ High/Low Pressure-208/230V/1/60
RA1624AJ1NB	Achiever® Series 2 ton 16 SEER Single-Stage Air Conditioner w/ High/Low Pressure-208/230V/1/60
RA1630AJ1NB	Achiever® Series 2 1/2 ton 16 SEER Single-Stage Air Conditioner w/ High/Low Pressure-208/230V/1/60
RA1636BJ1NB	Achiever® Series 3 ton 16 SEER Single-Stage Air Conditioner w/ High/Low Pressure-208/230V/1/60
RA1642AJ1NB	Achiever® Series 3 1/2 ton 16 SEER Single-Stage Air Conditioner w/ High/Low Pressure-208/230V/1/60
RA1648AJ1NB	Achiever® Series 4 ton 16 SEER Single-Stage Air Conditioner w/ High/Low Pressure-208/230V/1/60
RA1660AJ1NB	Achiever® Series 5 ton 16 SEER Single-Stage Air Conditioner w/ High/Low Pressure-208/230V/1/60
RA1636BJ1NB	Achiever® Series 3 ton 16 SEER Single-Stage Air Conditioner w/ High/Low Pressure-208/230V/1/60
RA1642AJ1NB	Achiever® Series 3 1/2 ton 16 SEER Single-Stage Air Conditioner w/ High/Low Pressure-208/230V/1/60
RA1648AJ1NB	Achiever® Series 4 ton 16 SEER Single-Stage Air Conditioner w/ High/Low Pressure-208/230V/1/60
RA1660AJ1NB	Achiever® Series 5 ton 16 SEER Single-Stage Air Conditioner w/ High/Low Pressure-208/230V/1/60

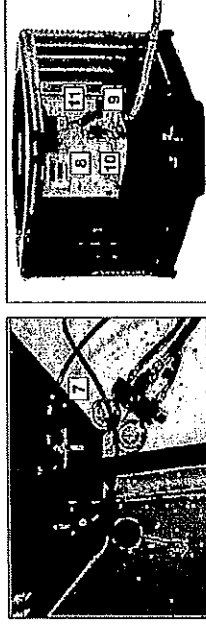
Introduction to RA16 Air Conditioner

The RA16 is our 16 SEER air conditioner and is part of the Ruud air conditioner product line that extends from 13 to 20 SEER. This highly featured and reliable air conditioner is designed for years of reliable, efficient operation when matched with Ruud indoor aluminum evaporator coils and furnaces or air handler units with aluminum evaporators.

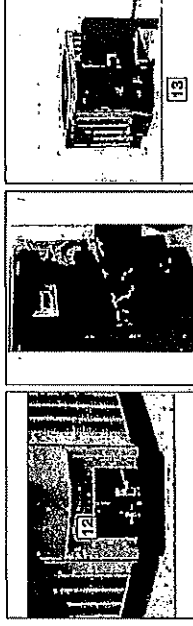
Our unique composite base (1) reduces sound emission, eliminates rattles, significantly reduces fasteners, eliminates corrosion and has integrated brass compressor attachment inserts (2). Furthermore it has incorporated into the design, water management features, means for hand placement (3) for unit maneuvering, screw trays (4) and inserts for lifting off unit pad. (5)



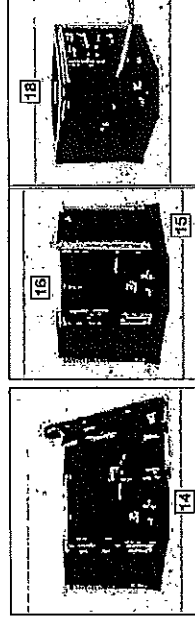
Service Valves (6) are rigidly mounted in the composite base with 3" between suction and discharge valves, 4" clearance below service valves and a minimum of 5" above the service valves, creating industry leading installation ease. The minimum 27 square-inches around the service valves allows ample room to remove service valve schrader prior to brazing, plenty of clearance for easy brazing of the suction and discharge lines to service valve outlets, easy access and hookup of low loss refrigerant gauges (7), and access to the service valve caps for opening. For applications with long-line lengths up to 250 feet total equivalent length, up to 200 feet condenser above evaporator, or up to 80 feet evaporator above condenser, the long-line instructions in the installation manual should be followed.



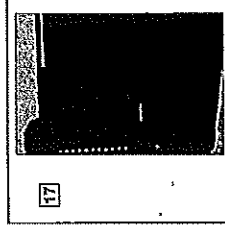
Controls are accessed from the corner of the unit by removing only two fasteners from the control access cover, revealing the industry's largest 15" wide and 14" tall control area (8). With all this room in the control area the high voltage electrical whip (9) can easily be inserted through the right size opening in the bottom of the control area. Routing it leads directly to contractor lugs for connection. The low voltage control wires (10) are easily connected to units low voltage wiring. If contactor or capacitor (11) needs to be replaced there is more than adequate space to make the repair. Furthermore, if high pressure and low pressure model was not purchased but is desired to be installed in the field, the service window (12) can be removed by removing two screws, to access the high and low side schrader fittings for easy field installation. The entire corner can be removed providing ultimate access to install the high and low pressure switch. (13)



If in the rare event, greater access is needed to internal components, such as the compressor, the entire corner of the unit can be removed along with the top cover assembly to have unprecedented access to interior of the unit (14). Extra wire length is incorporated into each outdoor fan and compressor so top cover and control panel can be positioned next to the unit. With minimal effort the plug can be removed from the compressor and the outdoor fan wires can be removed from the capacitor to allow even more uncluttered access to the interior of the unit (15). Outdoor coil heights range from as short as 27" to 48", aiding access to the compressor. Disassembly to this degree and complete reassembly only takes a first time service technician less than 10 minutes. (15)

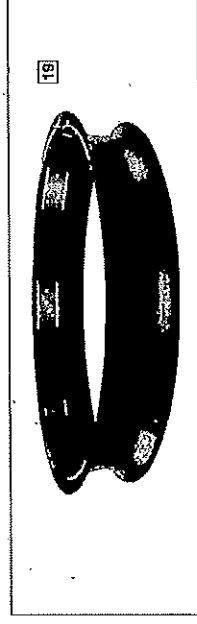


All units utilize strong formed louver panels which provide industry leading coil protection. Louver removal for coil cleaning is accomplished by removing one screw and lifting the panel out of the composite base pan. (17) All RA16 units utilize single row coils (18) making clearing easy and complete, restoring the performance of the air conditioner back to out of the box performance levels year after year.

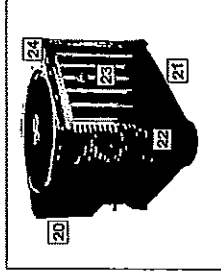


The outdoor fan motor has sleeve bearings and is inherently protected. The motor is totally enclosed for maximum protection from weather, dust and corrosion. Access to the outdoor fan is made by removing four fasteners from the fan grille. The outdoor fan can be removed from the fan grille by removing 4 fasteners in the rare case outdoor fan motor fails.

Each cabinet has optimized composite (19) fan orifice assuring efficient and quiet airflow.

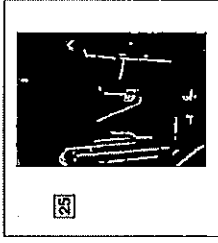


The entire cabinet has powder post paint (20) achieving 1000 hour salt spray rating, allowing the cabinet to retain its aesthetics throughout its life.



Scroll compressors with standard internal pressure relief and internal thermal overload are used on all capacities assuring longevity of high efficient and quiet operation for the life of the product.

Each unit is shipped with filter drier for field installation and will trap any moisture or dirt that could contaminate the refrigerant system.



All cabinets have industry leading structural strength due to the composite base pan (21), interlocking corner post (22), formed curved louver panels (23) and drawn top cover (24) making it the most durable cabinet on the market today.

Each RA16 capacity has undergone rigorous psychometric testing to assure performance ratings of capacity, SEER and EER per AHRI Standard 210/240 rating conditions. Also each unit bears the UL mark and each unit is certified to UL 1995 safety standards.

Each unit has undergone specific strain and modal testing to assure tubing (25) is outside the units natural frequency and that the suction and discharge lines connected to the compressor withstand any starting, steady state operation or shut down forces imposed by the compressor.

All units have been sound tested in sound chamber to AHRI 270 rating conditions, and A-weighted Sound Power Level tables produced, assuring units have acceptable noise qualities (see page 8). Each unit has been ran in cooling operation at 95°F and 82°F and sound ratings for the RA16 range from as low as 70.7 dBA to 76.6 dBA.

All units have been ship tested to assure units meet stringent "over the road" shipping conditions.

As manufactured all units in the RA16 family have cooling capability to 55 °F. Addition of low ambient control will allow the unit to operate down to 0°F. Factory testing is performed on each unit. All component parts meet well defined specification and continually go through receiving inspections. Each component installed on a unit is scanned, assuring correct component utilization for a given unit capacity and voltage. All condenser coils are leak tested with pressurization test to 550#s and once installed and assembled, each units' complete refrigerant system is helium leak tested. All units are fully charged from the factory for up to 15 feet of piping. All units are factory run tested. The RA16 has a 10-year conditional compressor and parts warranty (registration required).

Optional Accessories (Refer to accessory chart for model #)

Compressor Crankcase Heater

Protects against refrigerant migration that can occur during low ambient operation

Compressor Sound Cover

- Reinforced vinyl compressor cover containing a 1½ inch thick batt of fiberglass insulation
- Open edges are sealed with a one-inch wide hook and loop fastening tape

Compressor Hard Start Kit

- Single-phase units are equipped with a PSC compressor motor, this type of motor normally does not need a potential relay and start capacitor
- Kit may be required to increase the compressor starting torque, in conditions such as low voltage

Low Ambient Kit

- Air conditioners operate satisfactorily in the cooling mode down to 55°F outdoor air temperature without any additional controls
- This Kit can be added in the field enabling unit to operate properly down to 0° in the cooling mode
- Crankcase heater and freeze-stat should be installed on compressors equipped with a low ambient kit

3" / 6" / 12"

- Gray high density polyethylene feet are available to raise unit off of mounting surface away from moisture

Low Pressure

- Can be added in field enabling the unit to shut off compressor on loss of charge

NOTE: Unit can be purchased with high and low pressure installed at factory. (Refer to SKU list)

High Pressure

- Can be added in field enabling unit to shut off compressor if unit loses outdoor fan operation.

NOTE: Unit can be purchased with high and low pressure installed at factory. (Refer to SKU list)

Decorative Top

- Can be installed on fan grille

Air Conditioners

<u>R</u>	<u>A</u>	<u>16</u>	<u>24</u>	<u>A</u>	<u>J</u>	<u>1</u>	<u>N</u>	<u>A</u>	<u>*</u>
Brand	Product Category	SEER	Capacity BTU/HR	Major Series*	Voltage	Type	Controls	Minor Series**	Option Code
Ruud	A - Air Conditioners	13 - 13 SEER	18 - 18,000 [5.28 kW]	A - 1st Design	J - 1ph, 208-230/60	1 - Single-stage	C - Communicating	A - 1st Design	N/A
		14 - 14 SEER	24 - 24,000 [7.03 kW]	B - 2nd Design	C - 3ph, 208-230/60	2 - Two-stage	N - Non-Communicating		
		16 - 16 SEER	30 - 30,000 [8.79 kW]			V - Inverter			
		17 - 17 SEER	36 - 36,000 [10.55 kW]						
		20 - 20 SEER	42 - 42,000 [12.31 kW]						
			48 - 48,000 [14.07 kW]						
			60 - 60,000 [17.58 kW]						

Heat Pumps (For Reference)

<u>R</u>	<u>P</u>	<u>14</u>	<u>24</u>	<u>A</u>	<u>J</u>	<u>1</u>	<u>N</u>	<u>A</u>	<u>*</u>
Brand	Product Category	SEER	Capacity BTU/HR	Major Series*	Voltage	Type	Controls	Minor Series**	Option Code
Ruud	P - Heat Pump	13 - 13 SEER	18 - 18,000 [5.28 kW]	A - 1st Design	J - 1ph, 208-230/60	1 - Single-stage	C - Communicating	A - 1st Design	N/A
		14 - 14 SEER	24 - 24,000 [7.03 kW]		C - 3ph, 208-230/60	2 - Two-stage	N - Non-Communicating		
		15 - 15 SEER	30 - 30,000 [8.79 kW]		D - 3ph, 460/60	V - Inverter			
		17 - 17 SEER	36 - 36,000 [10.55 kW]			P - Piston			
		20 - 20 SEER	42 - 42,000 [12.31 kW]						
			48 - 48,000 [14.07 kW]						
			60 - 60,000 [17.58 kW]						

Furnace Coils (For Reference)

<u>R</u>	<u>C</u>	<u>F</u>	<u>24</u>	<u>17</u>	<u>S</u>	<u>I</u>	<u>A</u>	<u>M</u>	<u>C</u>	<u>A</u>	<u>*</u>
Brand	Product Category	Type	Capacity BTU/HR	Width	Efficiency	Metering Device	Major Series*	Orientation	Casing	Minor Series**	Option Code
Ruud	C - Evap Coil	F - Furn Coil	24 - 24,000 [7.03 kW]	14 - 14"	S- Standard Eff.	T-TXV	A - 1st Design	M - Multipoise	C - Cased	A - 1st Design	N/A
		H - Air-Handler Coil	36 - 36,000 [10.55 kW]	17 - 17.5"	M- Mid Eff.	E-EEV		V - Vertical only/convertible	U - Uncased		
			48 - 48,000 [14.07 kW]	21 - 21"	H- High Eff.	P-Piston		H - Ded. Horizontal only			
			60 - 60,000 [17.58 kW]	24 - 24.5"							

[] Designates Metric Conversions

90%+ AFUE Gas Furnaces (For Reference)

<u>R</u>	<u>96</u>	<u>V</u>	<u>A</u>	<u>70</u>	<u>2</u>	<u>3</u>	<u>17</u>	<u>M</u>	<u>S</u>	<u>A</u>	
Brand	Series	Motor	Major Rev	Input BTU/HR	Stages	Air Flow	Cabinet Width	Configuration	Nox	Minor Rev	
Ruud	90 - 90 AFUE	V - Variable speed	A - 1st Design	040 - 42,000 [12.31 kW]	1 - Single-stage	3 - up to 3 ton	14 - 14"	M - Multi	X - Low Nox S - Standard	A - 1st Design	
	92 - 92 AFUE	T - Constant		060 - 56,000 [16.41 kW]	2 - Two-stage	5 - 3 1/2 up to 5 ton	17 - 17.5"				
	95 - 95 AFUE	Torque		070 - 70,000 [20.51 kW]	M - Modulating		21 - 21"				
	96 - 96 AFUE	(X-13)		085 - 84,000 [24.62 kW]			24 - 24.5"				
	97 - 97 AFUE	P - PSC		100 - 98,000 [28.72 kW]							
				115 - 112,000 [32.82 kW]							

80% AFUE Gas Furnaces (For Reference)

<u>R</u>	<u>80</u>	<u>2</u>	<u>V</u>	<u>A</u>	<u>075</u>	<u>3</u>	<u>17</u>	<u>M</u>	<u>S</u>	<u>A</u>
Brand	Series	Stages	Motor	Major Rev	Input BTU/HR	Air Flow	Cabinet Width	Configuration	Nox	Minor Rev
Ruud	80 - 80+ AFUE	1 - Single-stage	V - Variable speed	A - 1st Design	050 - 50,000 [15 kW]	3 - up to 3 ton	14 - 14"	M - Multi	X - Low Nox S - Standard	A - 1st Design
		2 - Two-stage	T - Constant Torque (X-13)		076 - 75,000 [22 kW]	4 - 2 1/2 to 4 ton	17 - 17.5"	D - Down		
			P - PSC premium		100 - 100,000 [29 kW]	5 - 3 1/2 up to 5 ton	21 - 21"	Z - Down &		
			S - PSC standard		125 - 125,000 [37 kW]		24 - 24.5"	zero clearance		
					150 - 150,000 [44 kW]			down flow		

Air Handlers (For Reference)

<u>R</u>	<u>H</u>	<u>1</u>	<u>T</u>	<u>36</u>	<u>17</u>	<u>S</u>	<u>T</u>	<u>A</u>	<u>N</u>	<u>A</u>	<u>A</u>	<u>000</u>	<u>*</u>
Brand	Product Category	Stages of Airflow	Motor Type	Capacity BTU/HR	Width	Coil Size	Metering Device	Major Series*	Controls	Voltage	Minor Series**	Factory Heat Cap	Option Code
Ruud	H - Air Handler	1 - Single-Stage	V - Variable	24 - 24,000 [7.03 kW]	14 - 14"	S - Standard Eff.	T - TEV	A - 1st Design	C - Communicating N - Non-comm	A - 1ph, 115/60 J - 1ph, 208-240/60 D - 3ph, 480/60	A - 1st Design	00 - no factory heat with option code	*TBD
		2 - Two-Stage	Speed	36 - 36,000 [10.55 kW]	17 - 17.5"		E - EEV						
		M - Modulating	T - Constant	48 - 48,000 [14.07 kW]	21 - 21"		P - Piston						
			Torque	60 - 60,000 [17.58 kW]	24 - 24.5"								
			P - PSC										

[] Designates Metric Conversions

General Data/Electrical Data
RA16 Series

Physical Data

PHYSICAL DATA							
Model No.	RA1618A	RA1624A	RA1630A	RA1636B	RA1642A	RA1648A	RA1660A
Nominal Tonnage	1.5	2.0	2.5	3.0	3.5	4.0	5.0
Valve Connections							
Liquid Line O.D. – in.	3/8	3/8	3/8	3/8	3/8	3/8	3/8
Suction Line O.D. – in.	3/4	3/4	3/4	3/4	7/8	7/8	7/8
Refrigerant (R410A) furnished oz. ¹	82	87	113	108	150	174	201
Compressor Type	Scroll						
Outdoor Coil							
Net face area – Outer Coil	12.1	14.8	16.2	17.29	24.2	28.3	32.3
Net face area – Inner Coil	—	—	—	—	—	—	—
Tube diameter – in.	3/8	3/8	3/8	3/8	3/8	3/8	3/8
Number of rows	1	1	1	1	1	1	1
Fins per inch	22	22	22	22	22	22	22
Outdoor Fan							
Diameter – in.	20	24	26	24	26	26	26
Number of blades	3	2	3	3	3	3	3
Motor hp	1/8	1/6	1/5	1/6	1/3	1/3	1/3
CFM	2405	2850	3915	3300	4450	4660	4775
RPM	1095	851	710	825	829	828	795
watts	155	147	102	167	193	198	239
Shipping weight – lbs.	147	149	159	199	212	232	247
Operating weight – lbs.	140	142	152	192	205	225	240

Electrical Data

Line Voltage Data (Volts-Phase-Hz)	208/230-1-60	208/230-1-60	208/230-1-60	208/230-1-60	208/230-1-60	208/230-1-60	208/230-1-60	208/230-1-60	208/230-1-60
Maximum overcurrent protection (amps) ²	20	20	30	35	40	40	50	50	50
Minimum circuit ampacity ³	12	14	18	21	25	25	34	34	34
Compressor									
Rated load amps	9	10.3	12.8	15.4	16.7	17	23.7	23.7	23.7
Locked rotor amps	47.5	51.6	67.3	83.9	109	123.9	152.5	152.5	152.5
Condenser Fan Motor									
Full load amps	0.7	0.6	1.4	0.8	3.5	5.3	3.5	3.5	3.5
Locked rotor amps	1.3	1.5	2.3	1.5	—	2.3	—	—	—
Line Voltage Data (Volts-Phase-Hz)									
Maximum overcurrent protection (amps) ²	—	—	—	208/230-3-60	208/230-3-60	208/230-3-60	208/230-3-60	208/230-3-60	208/230-3-60
Minimum circuit ampacity ³	—	—	—	20	25	30	35	35	35
Compressor									
Rated load amps	—	—	—	10.4	11.2	13.6	15.9	15.9	15.9
Locked rotor amps	—	—	—	73	88	83.1	110	110	110
Condenser Fan Motor									
Full load amps	—	—	—	0.8	3.5	3.5	3.5	3.5	3.5
Locked rotor amps	—	—	—	1.5	—	2.3	—	—	—

¹Refrigerant charge sufficient for 15 ft. length of refrigerant lines. For longer line set requirements see the installation instructions for information about set length and additional refrigerant charge required.

²HACR type circuit breaker or fuse.

³Refer to National Electrical Code manual to determine wire, fuse and disconnect size requirements.

Accessories

Model No.	RA1618	RA1624	RA1630	RA1636	RA1642	RA1648	RA1660
Compressor crankcase heater*	44-17402-44	44-17402-44	44-17402-44	44-17402-44	44-17402-45	44-17402-45	44-17402-45
Low ambient control	RXAD-A08	RXAD-A08	RXAD-A08	RXAD-A08	RXAD-A08	RXAD-A08	RXAD-A08
Freeze Stat	50313	50313	50313	50313	50313	50313	50313
Compressor sound cover	68-23427-26	68-23427-25	68-23427-26	68-23427-26	68-23427-25	68-23427-25	68-23427-25
Compressor hard start kit	SK-A1	SK-A1	SK-A1	SK-A1	SK-A1	SK-A1	SK-A1
Low pressure control	RXAC-A07	RXAC-A07	RXAC-A07	RXAC-A07	RXAC-A07	RXAC-A07	RXAC-A07
High pressure control	RXAB-A07	RXAB-A07	RXAB-A07	RXAB-A07	RXAB-A07	RXAB-A07	RXAB-A07
Heat pump Riser 6 in.	686020	686020	686020	686020	686020	686020	686020
Liquid Line Solenoid (24 VAC, 50/60 Hz)	200RD2T3TVLC	200RD2T3TVLC	200RD2T3TVLC	200RD2T3TVLC	200RD2T3TVLC	200RD2T3TVLC	200RD2T3TVLC
Liquid Line Solenoid (120/240 VAC, 50/60 Hz)	61-AMG24V	61-AMG24V	61-AMG24V	61-AMG24V	61-AMG24V	61-AMG24V	61-AMG24V
Achiever Top Cap w/Label	91-101123-21	91-101123-21	91-101123-21	91-101123-21	91-101123-21	91-101123-21	91-101123-21

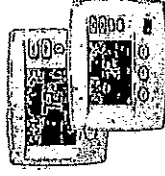
*Crankcase Heater recommended with Low Ambient Kit.

Weighted Sound Power Level (dBA)

Unit Size - Voltage, Series	Standard Rating (dBA)	TYPICAL OCTAVE BAND SPECTRUM (dBA without tone adjustment)							
		125	250	500	1000	2000	4000	8000	
RA1618A	76.6	53.4	60	65.7	66.3	64.2	58.8	52.6	
RA1624A	75.5	49.9	58.4	61.4	64.1	61.6	57.3	50.8	
RA1630A	74.3	48.4	57.4	62.6	64.5	61.5	56.5	51.5	
RA1636B	75	51.6	58.7	63.1	66.1	62.3	59	55.7	
RA1642A	70.7	47.5	51	60.2	60.7	59.7	53.6	50.4	
RA1648A	74.3	51.2	56.1	64.5	65.6	60.7	56.6	52.6	
RA1660A	74.6	50.1	55.1	65.6	64.8	63.2	57.4	56.4	

NOTE: Tested in accordance with AHRI Standard 270-08 (not listed in AHRI)

Thermostats



200-Series *
Programmable



300-Series *
Deluxe
Programmable



400-Series *
Special Applications/
Programmable



500-Series *
Communicating/
Programmable

Brand	Descriptor (3 Characters)	Series (3 Characters)	System (2 Characters)	Type (2 Characters)
UHC	TST	213	UN	MS
UHC-Ruid	TST-Thermostat	200-Programmable 300-Deluxe Programmable 400-Special Applications/ 500-Communicating/ Programmable	GE=Gas Electric UN=Universal (AC/HP/GE) MD=Modulating Furnace DF=Dual Fuel CNC=Communicating	SS=Single Stage MS=Multi-Stage

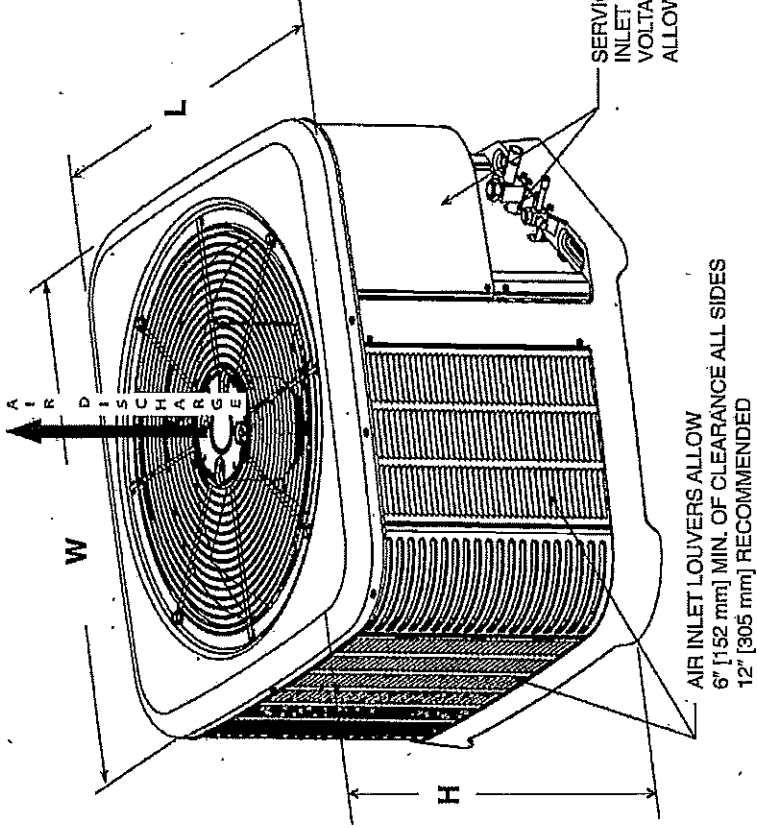
* Photos are representative. Actual models may vary.
For detailed thermostat match-up information,
see specification sheet form number T22-001.

Unit Dimensions
RA16 Series

Unit Dimensions

MODEL NO.	OPERATING				SHIPPING			
	H (Height)		L (Length)		H (Height)		L (Length)	
	INCHES	mm	INCHES	mm	INCHES	mm	INCHES	mm
RA1618A	27	685	29.75	755	27.375	695	32.25	819
RA1624A	27	685	33.75	857	27.375	695	36.25	921
RA1630A	27	685	35.75	908	27.375	695	38.25	972
RA1636B	31	787	33.75	857	31.375	797	36.25	921
RA1642A	39	990	35.75	908	39.375	1000	38.25	972
RA1648A	45	1143	35.75	908	45.375	1153	38.25	972
RA1660A	51	1295	35.75	908	51.375	1305	38.25	972

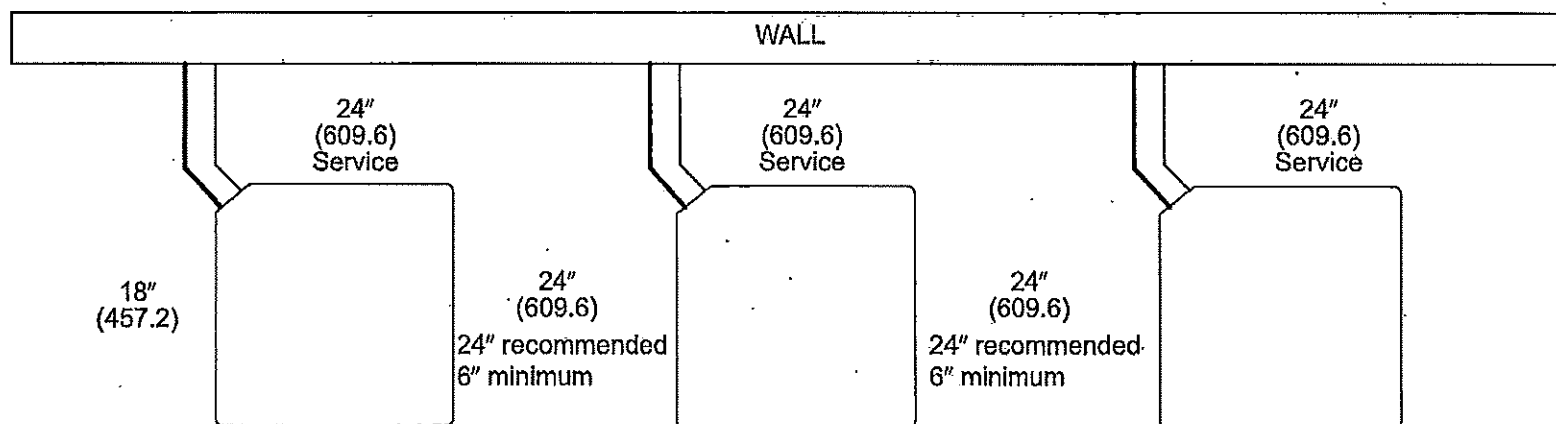
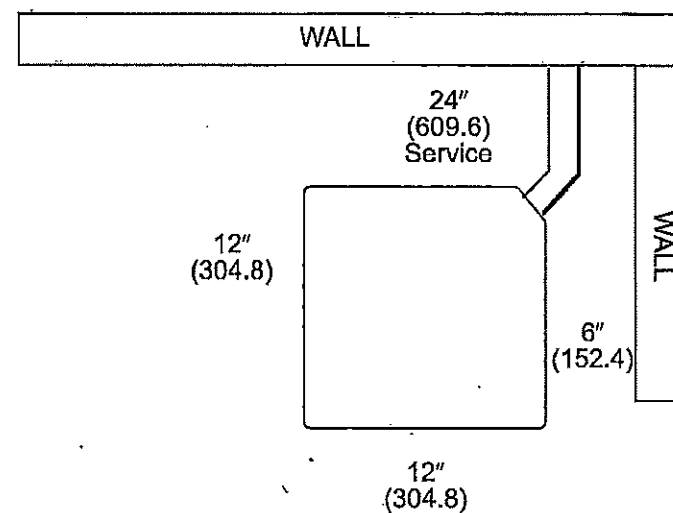
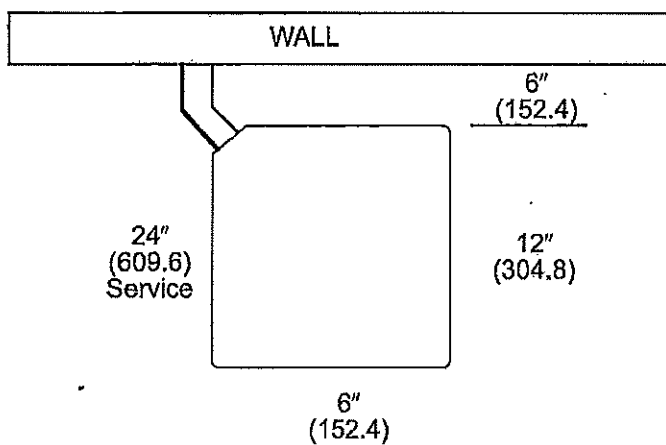
ALLOW 60" [1524 mm]
OF CLEARANCE



[] Designates Metric Conversions

ST-A1226-02-00

CLEARANCES

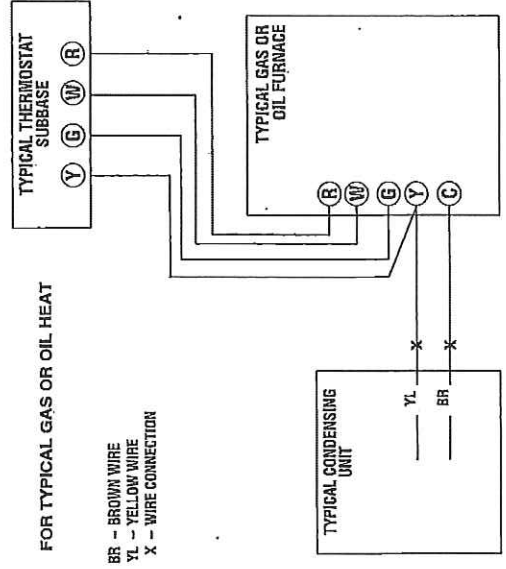


NOTE: NUMBERS IN () = mm

IMPORTANT: When installing multiple units in an alcove, roof well or partially enclosed area, ensure there is adequate ventilation to prevent re-circulation of discharge air.

Control Wiring

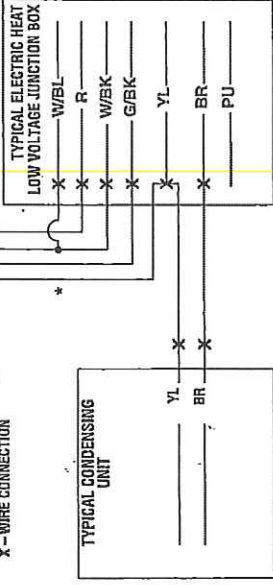
FIGURE 2
CONTROL WIRING FOR GAS OR OIL FURNACE



*IF MAXIMUM OUTLET TEMPERATURE RISE IS DESIRED, IT IS RECOMMENDED THAT W1 (W/BK) AND W2 (W/BL) BE JUMPED TOGETHER.

FOR TYPICAL ELECTRIC HEAT

BR - BROWN WIRE
R - RED WIRE
YL - WHITE WIRE WITH BLACK STRIPE
W/BK - GREEN WIRE WITH BLACK STRIPE
G/BK - PURPLE WIRE (NOT USED)
X - WIRE CONNECTION



Application Guidelines

1. Intended for outdoor installation with free air inlet and outlet. Outdoor fan external static pressure available is less than 0.01 -in. wc.
2. Minimum outdoor operation air temperature for cooling mode without low-ambient operation accessory is 55°F (12.8°C).
3. Maximum outdoor operating air temperature is 125°F (51.7°C).
4. For reliable operation, unit should be level in all horizontal planes.
5. Use only copper wire for electric connections at unit. Aluminum and clad aluminum are not acceptable for the type of connector provided.
6. Do not apply capillary tube indoor coils to these units.
7. Factory - supplied filter drier must be installed.

Refrigerant Line Size Information

R-410A System Capacity Model	Liquid Line Size Connection Size (Inch I.D.) [mm]	Liquid Line Size (Inch O.D.) [mm]	Liquid Line Selection Chart Elevation (Above or Below) Indoor Coil Total Equivalent Length - Feet [m]											
			25 [7.62]	50 [15.24]	75 [22.86]	100 [30.48]	125 [45.72]	150 [45.72]	175 [53.34]	200 [60.96]	225 [68.58]	250 [76.20]	275 [83.82]	300 [91.44]
			Maximum Vertical Separation - Feet [m]											
18	3/8" [9.53]	1/4 [6.35]	25 [7.62]	50 [15.24]	60 [18.29]	45 [13.72]	30 [9.14]	15 [4.57]	N/R	N/R	N/R	N/R	N/R	N/R
		5/16 [7.94]	25 [7.62]	50 [15.24]	75 [22.86]	85 [25.91]	85 [25.91]	80 [24.38]	75 [22.86]	70 [21.34]	70 [21.34]	65 [19.81]	60 [18.29]	55 [16.76]
		3/8 [9.53]	25 [7.62]	50 [15.24]	75 [22.86]	95 [28.96]	95 [28.96]	95 [28.96]	90 [27.43]	90 [27.43]	90 [27.43]	90 [27.43]	85 [25.91]	85 [25.91]
		7/16 [11.12]	25 [7.62]	50 [15.24]	75 [22.86]	100 [30.48]	100 [30.48]	100 [30.48]	100 [30.48]	95 [28.96]	95 [28.96]	95 [28.96]	95 [28.96]	95 [28.96]
		1/2 [12.71]	25 [7.62]	50 [15.24]	75 [22.86]	100 [30.48]	100 [30.48]	100 [30.48]	100 [30.48]	100 [30.48]	100 [30.48]	100 [30.48]	100 [30.48]	100 [30.48]
24	3/8" [9.53]	1/4 [6.35]	25 [7.62]	50 [15.24]	35 [10.67]	10 [3.05]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R
		5/16 [7.94]	25 [7.62]	50 [15.24]	75 [22.86]	80 [24.38]	75 [22.86]	70 [21.34]	60 [18.29]	55 [16.76]	50 [15.24]	45 [13.72]	40 [12.19]	30 [9.14]
		3/8 [9.53]	25 [7.62]	50 [15.24]	75 [22.86]	95 [28.96]	95 [28.96]	90 [27.43]	90 [27.43]	90 [27.43]	85 [25.91]	85 [25.91]	80 [24.38]	80 [24.38]
		7/16 [11.12]	25 [7.62]	50 [15.24]	75 [22.86]	100 [30.48]	100 [30.48]	100 [30.48]	100 [30.48]	100 [30.48]	95 [28.96]	95 [28.96]	95 [28.96]	95 [28.96]
		1/2 [12.71]	25 [7.62]	50 [15.24]	75 [22.86]	100 [30.48]	105 [32]	100 [30.48]	100 [30.48]	100 [30.48]	100 [30.48]	100 [30.48]	100 [30.48]	100 [30.48]
30	3/8" [9.53]	1/4 [6.35]	25 [7.62]	30 [9.14]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R
		5/16 [7.94]	25 [7.62]	50 [15.24]	70 [21.34]	65 [19.81]	55 [16.76]	45 [13.72]	35 [10.67]	25 [7.62]	20 [6.1]	10 [3.05]	N/R	N/R
		3/8 [9.53]	25 [7.62]	50 [15.24]	75 [22.86]	85 [25.91]	85 [25.91]	80 [24.38]	80 [24.38]	75 [22.86]	70 [21.34]	70 [21.34]	65 [19.81]	60 [18.29]
		7/16 [11.12]	25 [7.62]	50 [15.24]	75 [22.86]	95 [28.96]	95 [28.96]	90 [27.43]	90 [27.43]	90 [27.43]	85 [25.91]	85 [25.91]	85 [25.91]	85 [25.91]
		1/2 [12.71]	25 [7.62]	50 [15.24]	75 [22.86]	95 [28.96]	95 [28.96]	95 [28.96]	95 [28.96]	95 [28.96]	95 [28.96]	95 [28.96]	95 [28.96]	90 [27.43]
36	3/8" [9.53]	1/4 [6.35]	25 [7.62]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R
		5/16 [7.94]	25 [7.62]	50 [15.24]	60 [18.29]	45 [13.72]	35 [10.67]	20 [6.1]	5 [1.52]	N/R	N/R	N/R	N/R	N/R
		3/8 [9.53]	25 [7.62]	50 [15.24]	75 [22.86]	80 [24.38]	75 [22.86]	70 [21.34]	65 [19.81]	60 [18.29]	60 [18.29]	55 [16.76]	50 [15.24]	45 [13.72]
		7/16 [11.12]	25 [7.62]	50 [15.24]	75 [22.86]	90 [27.43]	90 [27.43]	85 [25.91]	85 [25.91]	85 [25.91]	80 [24.38]	80 [24.38]	75 [22.86]	75 [22.86]
		1/2 [12.71]	25 [7.62]	50 [15.24]	75 [22.86]	95 [28.96]	95 [28.96]	95 [28.96]	90 [27.43]	90 [27.43]	90 [27.43]	90 [27.43]	90 [27.43]	85 [25.91]
36B	3/8" [9.53]	1/4 [6.35]	25 [7.62]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R
		5/16 [7.94]	25 [7.62]	50 [15.24]	55 [16.76]	45 [13.72]	30 [9.14]	15 [4.57]	N/R	N/R	N/R	N/R	N/R	N/R
		3/8 [9.53]	25 [7.62]	50 [15.24]	75 [22.86]	80 [24.38]	75 [22.86]	70 [21.34]	65 [19.81]	60 [18.29]	55 [16.76]	50 [15.24]	45 [13.72]	40 [12.19]
		7/16 [11.12]	25 [7.62]	50 [15.24]	75 [22.86]	90 [27.43]	90 [27.43]	85 [25.91]	85 [25.91]	80 [24.38]	80 [24.38]	75 [22.86]	75 [22.86]	75 [22.86]
		1/2 [12.71]	25 [7.62]	50 [15.24]	75 [22.86]	95 [28.96]	95 [28.96]	95 [28.96]	95 [28.96]	90 [27.43]	90 [27.43]	90 [27.43]	90 [27.43]	90 [27.43]
42	3/8" [9.53]	1/4 [6.35]	20 [6.1]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R
		5/16 [7.94]	25 [7.62]	50 [15.24]	40 [12.19]	20 [6.1]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R
		3/8 [9.53]	25 [7.62]	50 [15.24]	75 [22.86]	70 [21.34]	60 [18.29]	55 [16.76]	50 [15.24]	45 [13.72]	40 [12.19]	30 [9.14]	25 [7.62]	20 [6.1]
		7/16 [11.12]	25 [7.62]	50 [15.24]	75 [22.86]	85 [25.91]	80 [24.38]	80 [24.38]	75 [22.86]	70 [21.34]	70 [21.34]	65 [19.81]	65 [19.81]	60 [18.29]
		1/2 [12.71]	25 [7.62]	50 [15.24]	75 [22.86]	90 [27.43]	85 [25.91]	85 [25.91]	85 [25.91]	85 [25.91]	80 [24.38]	80 [24.38]	80 [24.38]	80 [24.38]
48	3/8" [9.53]	1/4 [6.35]	15 [4.57]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R
		5/16 [7.94]	25 [7.62]	50 [15.24]	35 [10.67]	15 [4.57]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R
		3/8 [9.53]	25 [7.62]	50 [15.24]	75 [22.86]	65 [19.81]	60 [18.29]	55 [16.76]	45 [13.72]	40 [12.19]	30 [9.14]	25 [7.62]	20 [6.1]	10 [3.05]
		7/16 [11.12]	25 [7.62]	50 [15.24]	75 [22.86]	85 [25.91]	80 [24.38]	80 [24.38]	75 [22.86]	70 [21.34]	70 [21.34]	65 [19.81]	65 [19.81]	60 [18.29]
		1/2 [12.71]	25 [7.62]	50 [15.24]	75 [22.86]	90 [27.43]	90 [27.43]	85 [25.91]	85 [25.91]	85 [25.91]	85 [25.91]	80 [24.38]	80 [24.38]	80 [24.38]
60	3/8" [9.53]	1/4 [6.35]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R
		5/16 [7.94]	25 [7.62]	30 [9.14]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R
		3/8 [9.53]	25 [7.62]	50 [15.24]	60 [18.29]	50 [15.24]	40 [12.19]	30 [9.14]	20 [6.1]	5 [1.52]	N/R	N/R	N/R	N/R
		7/16 [11.12]	25 [7.62]	50 [15.24]	75 [22.86]	70 [21.34]	70 [21.34]	65 [19.81]	60 [18.29]	55 [16.76]	50 [15.24]	45 [13.72]	40 [12.19]	40 [12.19]
		1/2 [12.71]	25 [7.62]	50 [15.24]	75 [22.86]	80 [24.38]	80 [24.38]	75 [22.86]	75 [22.86]	70 [21.34]	70 [21.34]	65 [19.81]	65 [19.81]	65 [18.81]

NOTES:

N/R = Application not recommended.

Grey = This application is acceptable, but the long line guidelines must be followed. Reference Long Line Set section in the L&O

[] Designates Metric Conversions

Refrigerant Line Size Information (cont.)

R-410A System Capacity Model	Vapor Line Connection Size (Inch I.D.) (mm)	Vapor Line Size (Inch O.D.) (mm)	Vapor Line Selection Chart																								
			Total Equivalent Length - Feet (m)																								
			25 [7.62]	50 [15.24]	75 [22.86]	100 [30.48]	125 [45.72]	150 [45.72]	175 [53.34]	200 [60.96]	225 [68.58]	250 [76.20]	275 [83.82]	300 [91.44]													
18	3/4" [19.06]	5/8 [15.88]	1.00	0.99	0.99	0.99	0.98	0.98	0.97	0.97	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96		
		3/4 [19.06]	1.00	1.00	1.00	1.00	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99		
		7/8 [22.23]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R		
		1-1/8 [28.58]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	
24	3/4" [19.06]	5/8 [15.88]	1.01	0.99	0.98	0.97	0.96	0.95	0.94	0.93	0.91	0.90	0.89	0.88	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87		
		3/4 [19.06]	1.01	1.00	1.00	1.00	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99		
		7/8 [22.23]	1.01	1.00	1.00	1.00	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99		
		1-1/8 [28.58]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	
30	3/4" [19.06]	5/8 [15.88]	1.01	0.99	0.98	0.97	0.96	0.95	0.94	0.93	0.91	0.90	0.89	0.88	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87		
		3/4 [19.06]	1.01	1.00	1.00	1.00	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99		
		7/8 [22.23]	1.01	1.00	1.00	1.00	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99		
		1-1/8 [28.58]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	
36	3/4" [19.06]	5/8 [15.88]	1.01	0.99	0.98	0.97	0.96	0.95	0.94	0.93	0.91	0.90	0.89	0.88	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87		
		3/4 [19.06]	1.01	1.00	1.00	1.00	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99		
		7/8 [22.23]	1.01	1.00	1.00	1.00	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99		
		1-1/8 [28.58]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	
36B	3/4" [19.06]	5/8 [15.88]	1.01	0.99	0.98	0.97	0.96	0.95	0.94	0.93	0.91	0.90	0.89	0.88	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87	0.87		
		3/4 [19.06]	1.01	1.00	1.00	1.00	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99		
		7/8 [22.23]	1.01	1.00	1.00	1.00	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99	0.99		
		1-1/8 [28.58]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	
42	7/8" [22.23]	5/8 [15.88]	0.98	0.97	0.95	0.92	0.91	0.90	0.89	0.88	0.86	0.85	0.84	0.83	0.83	0.83	0.83	0.83	0.83	0.83	0.83	0.83	0.83	0.83	0.83		
		3/4 [19.06]	1.00	0.98	0.98	0.97	0.96	0.95	0.95	0.95	0.95	0.93	0.93	0.93	0.93	0.93	0.93	0.93	0.93	0.93	0.93	0.93	0.93	0.93	0.93		
		7/8 [22.23]	1.00	1.00	0.99	0.99	0.98	0.98	0.97	0.97	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96		
		1-1/8 [28.58]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	
48	7/8" [22.23]	5/8 [15.88]	0.98	0.95	0.92	0.88	0.88	0.86	0.85	0.82	0.81	0.80	0.79	0.78	0.77	0.76	0.75	0.74	0.73	0.72	0.71	0.70	0.69	0.68	0.67		
		3/4 [19.06]	1.00	0.99	0.98	0.97	0.96	0.95	0.94	0.94	0.93	0.92	0.91	0.90	0.89	0.88	0.87	0.86	0.85	0.84	0.83	0.82	0.81	0.80	0.79		
		7/8 [22.23]	1.00	1.00	1.00	1.00	0.99	0.98	0.97	0.96	0.95	0.94	0.93	0.92	0.91	0.90	0.89	0.88	0.87	0.86	0.85	0.84	0.83	0.82	0.81		
		1-1/8 [28.58]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	
60	7/8" [22.23]	5/8 [15.88]	0.98	0.95	0.92	0.88	0.88	0.86	0.85	0.82	0.81	0.80	0.79	0.78	0.77	0.76	0.75	0.74	0.73	0.72	0.71	0.70	0.69	0.68	0.67		
		3/4 [19.06]	1.00	0.99	0.98	0.97	0.96	0.95	0.94	0.94	0.93	0.92	0.91	0.90	0.89	0.88	0.87	0.86	0.85	0.84	0.83	0.82	0.81	0.80	0.79		
		7/8 [22.23]	1.01	1.00	1.00	1.00	0.99	0.98	0.97	0.96	0.95	0.94	0.93	0.92	0.91	0.90	0.89	0.88	0.87	0.86	0.85	0.84	0.83	0.82	0.81		
		1-1/8 [28.58]	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	N/R	

NOTES:

N/R = Application not recommended.
All calculations assume a 3/8" liquid line

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling

High Sales Volume Tested Combination (HSVTC)									
Outdoor Unit	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#	
RA1618AJ1	RCF2417STAM+RXMD-C04	18000 [5.3]	13600 [4.0]	4500 [1.3]	14.5	12.2	600 [283.2]	7940358	
RA1624AJ1	RCF2417STAM+RXMD-C04	24000 [7.0]	17600 [5.1]	6500 [1.9]	14.5	12.2	800 [377.6]	7940647	
RA1630AJ1	RCF3617STAM+RXMD-C04	28400 [8.3]	21600 [6.3]	6800 [2.0]	14.5	12.2	1025 [483.7]	7940990	
RA1636BC1	RCF3617STAM+RXMD-C04	35800 [10.5]	25500 [7.5]	10300 [3.0]	14.5	12.2	1100 [519.1]	8177920	
RA1636BJ1	RCF3617STAM+RXMD-C04	35800 [10.5]	25500 [7.5]	10300 [3.0]	14.5	12.2	1100 [519.1]	8176451	
RA1642AC1	RCF4821STAM+RXMD-C04	41000 [12.0]	30300 [8.9]	10700 [3.1]	14.5	12.2	1425 [672.5]	7942269	
RA1642AJ1	RCF4821STAM+RXMD-C04	41000 [12.0]	30300 [8.9]	10700 [3.1]	14.5	12.2	1425 [672.5]	7942605	
RA1648AC1	RCF4821MTAM+RXMD-C04	46000 [13.5]	35700 [10.5]	10300 [3.0]	15.1	12.5	1600 [755.1]	7943765	
RA1648AJ1	RCF4821MTAM+RXMD-C04	46000 [13.5]	35700 [10.5]	10300 [3.0]	15.1	12.5	1600 [755.1]	7943766	
RA1660AC1	RCF6024STAM+RXMD-C04	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1525 [719.7]	7943825	
RA1660AJ1	RCF6024STAM+RXMD-C04	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1525 [719.7]	7943604	

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

Coil Only Ratings									
Outdoor Unit	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#	
RA1618AJ1	RCF2414STAM+RXMD-C04	18000 [5.3]	13500 [4.0]	4500 [1.3]	14.5	12.2	600 [283.2]	7940295	
	RCF2417HTAM+RXMD-C04	18000 [5.3]	13000 [3.8]	5000 [1.5]	14.5	12.2	600 [283.2]	7940316	
	RCF2417MTAM+RXMD-C04	18000 [5.3]	13000 [3.8]	5000 [1.5]	14.5	12.2	600 [283.2]	7940337	
	RCF2421MTAM+RXMD-C04	18000 [5.3]	13000 [3.8]	5000 [1.5]	14.5	12.2	600 [283.2]	7940410	
	RCF2421HTAM+RXMD-C04	18000 [5.3]	13000 [3.8]	5000 [1.5]	14.5	12.2	600 [283.2]	7940384	
	RCF2414STAM+RXMD-C04	24000 [7.0]	17500 [5.1]	6500 [1.9]	14.5	12.2	800 [377.6]	7940574	
RA1624AJ1	RCF2417HTAM+RXMD-C04	24000 [7.0]	17500 [5.1]	6500 [1.9]	14.5	12.2	800 [377.6]	7940598	
	RCF2417MTAM+RXMD-C04	24000 [7.0]	17500 [5.1]	6500 [1.9]	14.5	12.2	800 [377.6]	7940622	
	RCF2421MTAM+RXMD-C04	24000 [7.0]	17500 [5.1]	6500 [1.9]	14.5	12.2	800 [377.6]	7940713	
	RCF2421HTAM+RXMD-C04	24000 [7.0]	17500 [5.1]	6500 [1.9]	14.5	12.2	800 [377.6]	7940680	
	RCF3621HTAM+RXMD-C04	30000 [8.8]	22800 [6.7]	7200 [2.1]	15	12.5	1025 [483.7]	8080028	
	RCF3621MTAM+RXMD-C04	29600 [8.7]	20900 [6.1]	8700 [2.5]	15.1	12.5	1025 [483.7]	7940974	
RA1630AJ1	RCF3621STAM+RXMD-C04	28400 [8.3]	21600 [6.3]	6800 [2.0]	14.5	12.2	1025 [483.7]	7941018	
	RCF3624HTAM+RXMD-C04	30000 [8.8]	22800 [6.7]	7200 [2.1]	15.1	12.5	1025 [483.7]	7941049	
	RCF3624MTAM+RXMD-C04	29600 [8.7]	20900 [6.1]	8700 [2.5]	15.1	12.5	1025 [483.7]	7941080	
	RCF3621HTAM+RXMD-C04	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1200 [566.3]	8177944	
	RCF3621MTAM+RXMD-C04	36000 [10.6]	25600 [7.5]	10400 [3.0]	14.5	12.2	1150 [542.7]	8177992	
	RCF3621STAM+RXMD-C04	35800 [10.5]	25500 [7.5]	10300 [3.0]	14.5	12.2	1100 [519.1]	8178039	
RA1636BJ1	RCF3624HTAM+RXMD-C04	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1200 [566.3]	8178076	
	RCF3624MTAM+RXMD-C04	36000 [10.6]	25600 [7.5]	10400 [3.0]	14.5	12.2	1200 [566.3]	8178113	
	RCF3621HTAM+RXMD-C04	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1200 [566.3]	8178475	
	RCF3621MTAM+RXMD-C04	36000 [10.6]	25600 [7.5]	10400 [3.0]	14.5	12.2	1150 [542.7]	8178521	
	RCF3621STAM+RXMD-C04	35800 [10.5]	25500 [7.5]	10300 [3.0]	14.5	12.2	1100 [519.1]	8178567	
	RCF3624HTAM+RXMD-C04	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1200 [566.3]	8178602	
RA1642AJ1	RCF3624MTAM+RXMD-C04	36000 [10.6]	25600 [7.5]	10400 [3.0]	14.5	12.2	1200 [566.3]	8178637	
	RCF4821MTAM+RXMD-C04	42000 [12.3]	29600 [8.7]	12400 [3.6]	14.5	12.2	1425 [672.5]	8080539	
	RCF4824HTAM+RXMD-C04	42000 [12.3]	31100 [9.1]	10900 [3.2]	15.1	12.5	1425 [672.5]	7942305	
	RCF4824MTAM+RXMD-C04	41000 [12.0]	30300 [8.9]	10700 [3.1]	14.5	12.2	1425 [672.5]	7942342	
	RCF4821HTAM+RXMD-C04	42000 [12.3]	31100 [9.1]	10900 [3.2]	14.5	12.2	1425 [672.5]	8080654	
	RCF4824STAM+RXMD-C04	42000 [12.3]	30300 [8.9]	10700 [3.1]	15.1	12.5	1425 [672.5]	7942641	
RA1648AJ1	RCF4824HTAM+RXMD-C04	41000 [12.0]	30300 [8.9]	10700 [3.1]	14.5	12.2	1425 [672.5]	7942678	
	RCF4821STAM+RXMD-C04	44000 [12.9]	32600 [9.6]	11400 [3.3]	15.1	12.5	1375 [648.9]	7942932	
	RCF4824STAM+RXMD-C04	46500 [13.6]	34400 [10.1]	12100 [3.5]	15.5	13	1600 [755.1]	7942967	
	RCF4824HTAM+RXMD-C04	44000 [12.9]	32600 [9.6]	11400 [3.3]	15.1	12.5	1375 [648.9]	7943004	
	RCF4821MTAM+RXMD-C04	44000 [12.9]	32600 [9.6]	11400 [3.3]	15.1	12.5	1375 [648.9]	7943258	
	RCF4824MTAM+RXMD-C04	46500 [13.6]	34400 [10.1]	12100 [3.5]	15.5	13	1600 [755.1]	7943293	
RA1660AJ1	RCF4824HTAM+RXMD-C04	44000 [12.9]	32600 [9.6]	11400 [3.3]	15.1	12.5	1375 [648.9]	7943330	
	RCF6021STAM+RXMD-C04	55500 [16.3]	36600 [10.7]	18900 [5.5]	14.5	12	1750 [825.9]	8080979	
	RCF6024HTAM+RXMD-C04	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1525 [719.7]	7943796	
	RCF6021STAM+RXMD-C04	55500 [16.3]	36600 [10.7]	18900 [5.5]	14.5	12	1750 [825.9]	8081057	
	RCF6024HTAM+RXMD-C04	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1525 [719.7]	7943575	
	RCF6021STAM+RXMD-C04	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1525 [719.7]	7943575	

I] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

RS91T: Achiever Plus Single-Stage X-13 80% Furnace Ratings

Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/h [kW]	Net Sensible BTU/h [kW]	Net Latent BTU/h [kW]	SEER	EER	Indoor CFM [L/s]	AHR#
RA1618AJ1	R801TA050314MSA	RCF2414STAM	18006 [5.3]	13500 [4.0]	4500 [1.3]	16	13	625 [295.0]	7940294
		RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	625 [295.0]	7940296
		RCF2417MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	625 [295.0]	7940317
		RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	625 [295.0]	7940338
RA1618AJ1	R801TA050314MXA	RCF2414STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	625 [295.0]	8079876
		RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	625 [295.0]	8079877
		RCF2417MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	625 [295.0]	8079882
		RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	625 [295.0]	8079887
RA1618AJ1	R801TA075317ZSA	RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940297
		RCF2417MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940318
		RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940339
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940385
RA1618AJ1	R801TA075317ZXA	RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	8079878
		RCF2417MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	8079883
		RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	8079888
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	8079898
RA1618AJ1	R801TA075317ZSA	RCF2421HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940359
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	8079892
		RCF2414STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	800 [377.6]	7940573
		RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940575
RA1624AJ1	R801TA050314MSA	RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	7940599
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	825 [389.4]	7940623
		RCF2414STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	800 [377.6]	7940635
		RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	8079936
RA1624AJ1	R801TA050314MXA	RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	8079941
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	825 [389.4]	8079946
		RCF2414STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	800 [377.6]	7940576
		RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940600
RA1624AJ1	R801TA075317ZSA	RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	7940624
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940681
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	650 [306.8]	8079937
		RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	650 [306.8]	8079942
RA1624AJ1	R801TA075317ZXA	RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	8079947
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	650 [306.8]	8079958
		RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940648
		RCF3617STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	650 [306.8]	8079981
RA1630AJ1	R801TA050314MSA	RCF3617STAM	28800 [8.4]	21900 [6.4]	6900 [2.0]	16	13	1000 [471.9]	7940904
		RCF3617STAM	28800 [8.4]	21900 [6.4]	6900 [2.0]	16	13	1000 [471.9]	8079999
		RCF3617STAM	28800 [8.3]	21100 [6.2]	7300 [2.1]	16	13	875 [413.0]	7940905
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	7940931
RA1630AJ1	R801TA075317ZSA	RCF3621STAM	28400 [8.3]	21100 [6.2]	7300 [2.1]	16	13	875 [413.0]	7940975
		RCF3617STAM	28400 [8.3]	21100 [6.2]	7300 [2.1]	16	13	875 [413.0]	8080000
		RCF3621MTAM	29600 [8.7]	20500 [6.0]	9100 [2.7]	16	13	875 [413.0]	8080029
		RCF3621STAM	28400 [8.3]	21100 [6.2]	7300 [2.1]	16	13	875 [413.0]	8080042
RA1630AJ1	R801TA075417MSA	RCF3617STAM	29000 [8.5]	22100 [6.5]	6900 [2.0]	16	13	1000 [471.9]	7940906
		RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	8080005
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	7940932
		RCF3621STAM	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	1025 [483.7]	7940976

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R801T: Achiever Plus Single-Stage X-13 80% Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity, BTU/h [kW]	Net Sensible BTU/h [kW]	Net Latent BTU/h [kW]	SEER	EER	Indoor CFM IL/si	AHRI#
RA1630AJ1	R801TA075417MXA	RCF3617STAM	29000 [8.5]	22100 [6.5]	6900 [2.0]	16	13	1000 [471.9]	8080001
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	8080030
		RCF3621STAM	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	1025 [483.7]	8080043
		RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	8080006
RA1630AJ1	R801TA075421MSA	RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	8080031
		RCF3621STAM	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	1025 [483.7]	8080044
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	8080055
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	8080065
RA1630AJ1	R801TA075521ZSA	RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1000 [471.9]	7940933
		RCF3621STAM	28800 [8.4]	21800 [6.4]	7000 [2.1]	16	13	975 [460.1]	7940977
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	7941019
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1000 [471.9]	7941050
RA1630AJ1	R801TA075521ZXA	RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1000 [471.9]	8080032
		RCF3621STAM	28800 [8.4]	21800 [6.4]	7000 [2.1]	16	13	975 [460.1]	8080045
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	8080056
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1000 [471.9]	8080068
RA1630AJ1	R801TA100521MSA	RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8080007
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	7940934
		RCF3621STAM	29000 [8.5]	22100 [6.5]	6900 [2.0]	16	13	1000 [471.9]	7940978
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	7941051
RA1630AJ1	R801TA100521MXA	RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	8080033
		RCF3621STAM	29000 [8.5]	22100 [6.5]	6900 [2.0]	16	13	1000 [471.9]	8080046
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	8080067
		RCF3621MTAM	30000 [8.8]	21100 [6.2]	8900 [2.6]	16	13	975 [460.1]	7940935
RA1630AJ1	R801TA100521ZSA	RCF3621STAM	28800 [8.4]	21800 [6.4]	7000 [2.1]	16	13	975 [460.1]	7940979
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	7941020
		RCF3624MTAM	30000 [8.8]	21100 [6.2]	8900 [2.6]	16	13	975 [460.1]	7941052
		RCF3621MTAM	30000 [8.8]	21200 [6.2]	8800 [2.6]	16	13	975 [460.1]	8080034
RA1630AJ1	R801TA100521ZXA	RCF3621STAM	28800 [8.4]	21800 [6.4]	7000 [2.1]	16	13	975 [460.1]	8080047
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	8080057
		RCF3624MTAM	30000 [8.8]	21200 [6.2]	8800 [2.6]	16	13	975 [460.1]	8080068
		RCF3621MTAM	30000 [8.8]	21200 [6.2]	8800 [2.6]	16	13	975 [460.1]	7941021
RA1630AJ1	R801TA125524ZSA	RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	975 [460.1]	7941053
		RCF3624MTAM	29800 [8.7]	20700 [6.1]	9100 [2.7]	16	13	925 [436.6]	7941053
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	975 [460.1]	8080058
		RCF3624MTAM	29800 [8.7]	20900 [6.1]	8900 [2.6]	16	13	925 [436.6]	8080069
RA1636BC1	R801TA050314MSA	RCF3617STAM	35600 [10.4]	24900 [7.3]	10700 [3.1]	15.1	12.5	1000 [471.9]	8177894
		RCF3617STAM	35800 [10.5]	25300 [7.4]	10500 [3.1]	15.1	12.5	1050 [495.5]	8177895
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1075 [507.3]	8177945
		RCF3621STAM	35800 [10.5]	25300 [7.4]	10500 [3.1]	15.1	12.5	1050 [495.5]	8177993
RA1636BC1	R801TA075317ZSA	RCF3617STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1125 [530.9]	8177896
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1200 [566.3]	8177921
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1275 [601.7]	8177946
		RCF3621STAM	35800 [10.5]	25100 [7.4]	10700 [3.1]	15.5	13	1000 [471.9]	8177994
RA1636BC1	R801TA075421MSA	RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8177922
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8177947
		RCF3621STAM	35800 [10.5]	25100 [7.4]	10700 [3.1]	15.5	13	1000 [471.9]	8177995
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178041
RA1636BC1		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8178077

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R801T: Achiever Plus Single-Stage X-13 80% Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1636BC1	R801TA075521ZSA	RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8177948
		RCF3621STAM	35600 [10.4]	24700 [7.2]	10900 [3.2]	15.5	13	950 [448.4]	8177996
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178042
RA1636BC1	R801TA100521MSA	RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8178078
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1075 [507.3]	8177923
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1050 [495.5]	8177949
RA1636BC1	R801TA125524ZSA	RCF3621STAM	35800 [10.5]	25100 [7.4]	10700 [3.1]	15.5	13	1000 [471.9]	8177997
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1100 [519.1]	8178043
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1050 [495.5]	8178079
RA1636BJ1	R801TA100521ZSA	RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8177950
		RCF3621STAM	35600 [10.4]	24700 [7.2]	10900 [3.2]	15.5	13	950 [448.4]	8177998
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178044
RA1636BC1	R801TA125524MSA	RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8178080
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1200 [566.3]	8178045
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1175 [554.5]	8178081
RA1636BC1	R801TA125524ZSA	RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1150 [542.7]	8178046
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1100 [519.1]	8178082
		RCF3617STAM	35600 [10.4]	24900 [7.3]	10700 [3.1]	15.1	12.5	1000 [471.9]	8178425
RA1636BJ1	R801TA075317ZSA	RCF3617STAM	35800 [10.5]	25300 [7.4]	10500 [3.1]	15.1	12.5	1050 [495.5]	8178426
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1075 [507.3]	8178476
		RCF3621STAM	35800 [10.5]	25300 [7.4]	10500 [3.1]	15.1	12.5	1050 [495.5]	8178522
RA1636BJ1	R801TA075417MSA	RCF3617STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1125 [530.9]	8178427
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1200 [566.3]	8178452
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1275 [601.7]	8178477
RA1636BJ1	R801TA075421MSA	RCF3621STAM	35800 [10.5]	25100 [7.4]	10700 [3.1]	15.5	13	1000 [471.9]	8178523
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178453
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8178478
RA1636BJ1	R801TA075421MSA	RCF3621STAM	35800 [10.5]	25100 [7.4]	10700 [3.1]	15.5	13	1000 [471.9]	8178524
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178569
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8178604
RA1636BJ1	R801TA100521MSA	RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1075 [507.3]	8178454
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1050 [495.5]	8178480
		RCF3621STAM	35800 [10.5]	25100 [7.4]	10700 [3.1]	15.5	13	1000 [471.9]	8178526
RA1636BJ1	R801TA075521ZSA	RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8178479
		RCF3621STAM	35600 [10.4]	24700 [7.2]	10900 [3.2]	15.5	13	950 [448.4]	8178525
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178569
RA1636BJ1	R801TA100521ZSA	RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8178604
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1075 [507.3]	8178454
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1050 [495.5]	8178480
RA1636BJ1	R801TA125524MSA	RCF3621STAM	35800 [10.5]	25100 [7.4]	10700 [3.1]	15.5	13	1000 [471.9]	8178526
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1100 [519.1]	8178570
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1050 [495.5]	8178605
RA1636BJ1	R801TA125524ZSA	RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8178481
		RCF3621STAM	35600 [10.4]	24700 [7.2]	10900 [3.2]	15.5	13	950 [448.4]	8178527
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178571
RA1636BJ1	R801TA125524MSA	RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8178605
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1175 [554.5]	8178572
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1200 [566.3]	8178607
RA1636BJ1	R801TA125524ZSA	RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1150 [542.7]	8178573
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1100 [519.1]	8178608
		RCF4821STAM	40000 [11.7]	27400 [8.0]	12600 [3.7]	15.5	13	1075 [507.3]	7942224

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R801T: Achiever Plus Single-Stage X-13 80% Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1642AC1	R801TA075317ZXA	RCF4821STAM	40000 [11.7]	27400 [8.0]	12600 [3.7]	15.5	13	1075 [507.3]	8080540
RA1642AC1	R801TA075417MSA	RCF4821MTAM	42000 [12.3]	28900 [8.5]	13100 [3.8]	16	13	1300 [613.5]	8080514
RA1642AC1	R801TA075417MXA	RCF4821STAM	41000 [12.0]	29500 [8.6]	11500 [3.4]	15.5	13	1275 [601.7]	7942225
		RCF4821STAM	41000 [12.0]	29500 [8.6]	11500 [3.4]	15.5	13	1275 [601.7]	8080541
		RCF4821MTAM	41500 [12.2]	28200 [8.3]	13300 [3.9]	16	13	1250 [589.9]	8080515
RA1642AC1	R801TA075421MSA	RCF4821STAM	40500 [11.9]	28600 [8.4]	11900 [3.5]	16	13	1200 [566.3]	8080542
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8080553
		RCF4824STAM	40500 [11.9]	28600 [8.4]	11900 [3.5]	16	13	1200 [566.3]	8080565
RA1642AC1	R801TA075521ZSA	RCF4821STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	7942226
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	7942270
RA1642AC1	R801TA075521ZXA	RCF4821STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	7942306
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	8080543
		RCF4824STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	8080554
		RCF4821MTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8080516
RA1642AC1	R801TA100521MSA	RCF4821STAM	41500 [12.2]	30300 [8.9]	11200 [3.3]	16	13	1325 [625.3]	7942227
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	7942271
		RCF4824STAM	41500 [12.2]	30300 [8.9]	11200 [3.3]	16	13	1325 [625.3]	7942307
RA1642AC1	R801TA100521MXA	RCF4821STAM	41500 [12.2]	30300 [8.9]	11200 [3.3]	16	13	1325 [625.3]	8080544
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8080555
		RCF4824STAM	41500 [12.2]	30300 [8.9]	11200 [3.3]	16	13	1325 [625.3]	8080567
RA1642AC1	R801TA100521ZSA	RCF4821STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	7942228
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	7942272
		RCF4824STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	7942308
RA1642AC1	R801TA100521ZXA	RCF4821STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	8080545
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8080556
		RCF4824STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	8080568
RA1642AC1	R801TA125524MSA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1375 [648.9]	7942273
		RCF4824STAM	41500 [12.2]	30400 [8.9]	11100 [3.3]	16	13	1350 [637.1]	7942309
RA1642AC1	R801TA125524MXA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1375 [648.9]	8080557
		RCF4824STAM	41500 [12.2]	30400 [8.9]	11100 [3.3]	16	13	1350 [637.1]	8080569
RA1642AC1	R801TA125524ZSA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1375 [648.9]	7942274
		RCF4824STAM	40500 [11.9]	28000 [8.2]	12500 [3.7]	16	13	1100 [519.1]	7942310
RA1642AC1	R801TA125524ZXA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1375 [648.9]	8080558
		RCF4824STAM	40500 [11.9]	28000 [8.2]	12500 [3.7]	16	13	1100 [519.1]	8080570
RA1642AJ1	R801TA075317ZSA	RCF4821STAM	40000 [11.7]	27400 [8.0]	12600 [3.7]	15.5	13	1075 [507.3]	7942560
RA1642AJ1	R801TA075317ZXA	RCF4821STAM	40000 [11.7]	27400 [8.0]	12600 [3.7]	15.5	13	1075 [507.3]	8080555
RA1642AJ1	R801TA075417MSA	RCF4821MTAM	42000 [12.3]	28900 [8.5]	13100 [3.8]	16	13	1300 [613.5]	8080629
RA1642AJ1	R801TA075417MXA	RCF4821STAM	41000 [12.0]	29500 [8.6]	11500 [3.4]	15.5	13	1275 [601.7]	7942561
		RCF4821MTAM	41000 [12.0]	29500 [8.6]	11500 [3.4]	15.5	13	1275 [601.7]	8080656
		RCF4824HTAM	41500 [12.2]	28200 [8.3]	13300 [3.9]	16	13	1250 [589.9]	8080630
RA1642AJ1	R801TA075421MSA	RCF4821STAM	40500 [11.9]	28600 [8.4]	11900 [3.5]	16	13	1200 [566.3]	8090657
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8080668
		RCF4824STAM	40500 [11.9]	28600 [8.4]	11900 [3.5]	16	13	1200 [566.3]	8080680
		RCF4821STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	7942562
RA1642AJ1	R801TA075521ZSA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	7942606
		RCF4824STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	7942642

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions -- Cooling (con't.)

R801T: Achiever Plus Single-Stage X-13 80% Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHR#
RA1642AJ1	R801TA075521ZXA	RCF4821STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	8080658
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	8080669
		RCF4824STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	8080681
RA1642AJ1	R801TA100521MSA	RCF4821MTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8080631
		RCF4821STAM	41500 [12.2]	30300 [8.9]	11200 [3.3]	16	13	1325 [625.3]	7942563
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	7942607
RA1642AJ1	R801TA100521MXA	RCF4824STAM	41500 [12.2]	30300 [8.9]	11200 [3.3]	16	13	1325 [625.3]	7942643
		RCF4821STAM	41500 [12.2]	30300 [8.9]	11200 [3.3]	16	13	1325 [625.3]	8080659
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8080670
RA1642AJ1	R801TA100521ZSA	RCF4824STAM	41500 [12.2]	30300 [8.9]	11200 [3.3]	16	13	1325 [625.3]	8080682
		RCF4821STAM	41000 [12.0]	29200 [8.6]	11600 [3.5]	15.5	13	1225 [578.1]	7942564
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	7942608
RA1642AJ1	R801TA100521ZXA	RCF4824STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	7942644
		RCF4821STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	8080660
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8080671
RA1642AJ1	R801TA125524MMSA	RCF4824STAM	41000 [12.0]	29200 [8.6]	11800 [3.5]	15.5	13	1225 [578.1]	8080683
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1375 [648.9]	7942609
		RCF4824STAM	41500 [12.2]	30400 [8.9]	11100 [3.3]	16	13	1350 [637.1]	7942645
RA1642AJ1	R801TA125524MXA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1375 [648.9]	8080672
		RCF4824STAM	41500 [12.2]	30400 [8.9]	11100 [3.3]	16	13	1350 [637.1]	8080684
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1375 [648.9]	7942610
RA1642AJ1	R801TA125524ZSA	RCF4824STAM	40500 [11.9]	28000 [8.2]	12500 [3.7]	16	13	1100 [519.1]	7942646
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1375 [648.9]	8080673
		RCF4824STAM	40500 [11.9]	28000 [8.2]	12500 [3.7]	16	13	1100 [519.1]	8080685
RA1648AC1	R801TA075317ZSA	RCF4821STAM	43500 [12.7]	29500 [8.6]	14000 [4.1]	15.5	13	1225 [578.1]	7942895
		RCF4821HTAM	43500 [12.7]	29500 [8.6]	14000 [4.1]	15.5	13	1225 [578.1]	8080764
		RCF4821MTAM	45000 [13.2]	32900 [9.6]	12100 [3.5]	16	13	1300 [613.5]	8080744
RA1648AC1	R801TA075417MSA	RCF4821STAM	43500 [12.7]	29200 [8.6]	14300 [4.2]	16	13	1175 [554.5]	7942896
		RCF4821HTAM	43500 [12.7]	29200 [8.6]	14300 [4.2]	16	13	1175 [554.5]	8080765
		RCF4821MTAM	45500 [13.3]	34200 [10.0]	11300 [3.3]	16	13	1425 [672.5]	8080745
RA1648AC1	R801TA075421MSA	RCF4821STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	8080766
		RCF4821HTAM	46000 [13.5]	32800 [9.6]	13200 [3.9]	16	13	1425 [672.5]	8080776
		RCF4821MTAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	8080788
RA1648AC1	R801TA075521ZSA	RCF4821STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	7942897
		RCF4821HTAM	46000 [13.5]	33000 [9.7]	13000 [3.8]	16	13	1450 [684.3]	7942933
		RCF4821MTAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	7942968
RA1648AC1	R801TA075521ZXA	RCF4821STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	8080767
		RCF4821HTAM	46000 [13.5]	33000 [9.7]	13000 [3.8]	16	13	1450 [684.3]	8080777
		RCF4821MTAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	8080789
RA1648AC1	R801TA100521MSA	RCF4821STAM	45500 [13.3]	34000 [10.0]	11500 [3.4]	16	13	1400 [660.7]	8080746
		RCF4821HTAM	45500 [13.3]	34000 [10.0]	11500 [3.4]	16	13	1375 [648.9]	7942898
		RCF4821MTAM	47000 [13.8]	35300 [10.3]	11700 [3.4]	16	13	1650 [778.7]	7942934
RA1648AC1	R801TA100521MXA	RCF4821STAM	44500 [13.0]	31400 [9.2]	13100 [3.8]	16	13	1375 [648.9]	7942969
		RCF4821HTAM	44500 [13.0]	31400 [9.2]	13100 [3.8]	16	13	1375 [648.9]	8080768
		RCF4821MTAM	47000 [13.8]	35300 [10.3]	11700 [3.4]	16	13	1650 [778.7]	8080778
RA1648AC1	R801TA100521ZSA	RCF4821STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	8080790
		RCF4821HTAM	46000 [13.5]	32800 [9.6]	13200 [3.9]	16	13	1425 [672.5]	7942899
		RCF4821MTAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	7942935

I J Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R801T: Achiever Plus Single-Stage X-13 80% Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHR#
RA1648AC1	R801TA100521ZXA	RCF4821STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	8080769
		RCF4824HTAM	46000 [13.5]	32800 [9.6]	13200 [3.9]	16	13	1425 [672.5]	8080779
		RCF4824STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	8080781
RA1648AC1	R801TA125524MSA	RCF4824HTAM	47000 [13.8]	35300 [10.3]	11700 [3.4]	16	13	1650 [778.7]	7942936
		RCF4824STAM	44500 [13.0]	31100 [9.1]	13400 [3.9]	16	13	1325 [625.3]	7942971
RA1648AC1	R801TA125524MXA	RCF4824HTAM	47000 [13.8]	35300 [10.3]	11700 [3.4]	16	13	1650 [778.7]	8080780
		RCF4824STAM	44500 [13.0]	31100 [9.1]	13400 [3.9]	16	13	1325 [625.3]	8080792
RA1648AC1	R801TA125524ZSA	RCF4824HTAM	46000 [13.5]	32500 [9.5]	13500 [4.0]	16	13	1375 [648.9]	7942937
		RCF4824STAM	44500 [13.0]	31100 [9.1]	13400 [3.9]	15.5	13	1325 [625.3]	7942972
RA1648AC1	R801TA125524ZXA	RCF4824HTAM	46000 [13.5]	32500 [9.5]	13500 [4.0]	16	13	1375 [648.9]	8080781
		RCF4824STAM	44500 [13.0]	31100 [9.1]	13400 [3.9]	15.5	13	1325 [625.3]	8080793
RA1648AJ1	R801TA075317ZSA	RCF4821STAM	43500 [12.7]	29500 [8.6]	14000 [4.1]	15.5	13	1225 [578.1]	7943221
RA1648AJ1	R801TA075317ZXA	RCF4821STAM	43500 [12.7]	29500 [8.6]	14000 [4.1]	15.5	13	1225 [578.1]	8080871
RA1648AJ1	R801TA075417MSA	RCF4821MTAM	45000 [13.2]	32900 [9.6]	12100 [3.5]	16	13	1300 [613.5]	8080851
		RCF4821STAM	43500 [12.7]	29200 [8.6]	14300 [4.2]	16	13	1175 [554.5]	7943222
RA1648AJ1	R801TA075417MXA	RCF4821STAM	43500 [12.7]	29200 [8.6]	14300 [4.2]	16	13	1175 [554.5]	8080872
		RCF4821MTAM	45500 [13.3]	34200 [10.0]	11300 [3.3]	16	13	1425 [672.5]	8080852
RA1648AJ1	R801TA075421MSA	RCF4821STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	8080873
		RCF4824HTAM	46000 [13.5]	32800 [9.6]	13200 [3.9]	16	13	1425 [672.5]	8080883
		RCF4824STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	8080895
RA1648AJ1	R801TA075521ZSA	RCF4821STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	7943223
		RCF4824HTAM	46000 [13.5]	33000 [9.7]	13000 [3.8]	16	13	1450 [684.3]	7943259
		RCF4824STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	7943294
RA1648AJ1	R801TA075521ZXA	RCF4821STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	8080874
		RCF4824HTAM	46000 [13.5]	33000 [9.7]	13000 [3.8]	16	13	1450 [684.3]	8080884
		RCF4824STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	8080896
RA1648AJ1	R801TA100521MSA	RCF4821MTAM	45500 [13.3]	34000 [10.0]	11500 [3.4]	16	13	1400 [660.7]	8080853
		RCF4821STAM	44500 [13.0]	31400 [9.2]	13100 [3.8]	16	13	1375 [648.9]	7943224
		RCF4824HTAM	47000 [13.8]	35300 [10.3]	11700 [3.4]	16	13	1650 [778.7]	7943260
		RCF4824STAM	44500 [13.0]	31400 [9.2]	13100 [3.8]	16	13	1375 [648.9]	7943295
RA1648AJ1	R801TA100521MXA	RCF4821STAM	44500 [13.0]	31400 [9.2]	13100 [3.8]	16	13	1375 [648.9]	8080875
		RCF4824HTAM	47000 [13.8]	35300 [10.3]	11700 [3.4]	16	13	1650 [778.7]	8080885
		RCF4824STAM	44500 [13.0]	31400 [9.2]	13100 [3.8]	16	13	1375 [648.9]	8080897
RA1648AJ1	R801TA100521ZSA	RCF4821STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	7943225
		RCF4824HTAM	46000 [13.5]	32800 [9.6]	13200 [3.9]	16	13	1425 [672.5]	7943261
		RCF4824STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	7943296
RA1648AJ1	R801TA125521ZXA	RCF4821STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	8080876
		RCF4824HTAM	46000 [13.5]	32800 [9.6]	13200 [3.9]	16	13	1425 [672.5]	8080886
		RCF4824STAM	44000 [12.9]	29800 [8.7]	14200 [4.2]	16	13	1200 [566.3]	8080898
RA1648AJ1	R801TA125524MSA	RCF4821STAM	47000 [13.8]	35300 [10.3]	11700 [3.4]	16	13	1650 [778.7]	7943252
		RCF4824HTAM	44500 [13.0]	31100 [9.1]	13400 [3.9]	16	13	1325 [625.3]	7943297
RA1648AJ1	R801TA125524MXA	RCF4821STAM	47000 [13.8]	35300 [10.3]	11700 [3.4]	16	13	1650 [778.7]	8080887
		RCF4824HTAM	44500 [13.0]	31100 [9.1]	13400 [3.9]	16	13	1325 [625.3]	8080899
RA1648AJ1	R801TA125524ZSA	RCF4821STAM	46000 [13.5]	32500 [9.5]	13500 [4.0]	16	13	1375 [648.9]	7943263
		RCF4824HTAM	44500 [13.0]	31100 [9.1]	13400 [3.9]	15.5	13	1325 [625.3]	7943298
RA1648AJ1	R801TA125524ZXA	RCF4821STAM	46000 [13.5]	32500 [9.5]	13500 [4.0]	16	13	1375 [648.9]	8080888
		RCF4824HTAM	44500 [13.0]	31100 [9.1]	13400 [3.9]	15.5	13	1325 [625.3]	8080900
RA1660AC1	R801TA075417MSA	RCF6021STAM	54500 [16.0]	35300 [10.3]	19200 [5.6]	15.1	12.5	1400 [660.7]	8080958

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R801T: Achiever Plus Single-Stage X-13 80% Furnace Ratings

Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM L/s	AHRI#
RA1660AC1	R801TA075421MSA	RCF6021STAM	54500 [16.0]	35400 [10.4]	19100 [5.6]	15.1	12.5	1425 [672.5]	8080959
		RCF6024HTAM	56500 [16.6]	38300 [11.2]	18200 [5.3]	15.5	13	1425 [672.5]	8080980
		RCF6024STAM	56500 [16.6]	38300 [11.2]	18200 [5.3]	15.5	13	1425 [672.5]	8080992
RA1660AC1	R801TA075521ZSA	RCF6024HTAM	56500 [16.6]	38500 [11.3]	18000 [5.3]	15.5	13	1450 [684.3]	7943768
		RCF6024STAM	56500 [16.6]	38500 [11.3]	18000 [5.3]	15.5	13	1450 [684.3]	7943797
		RCF6024HTAM	56500 [16.6]	38500 [11.3]	18000 [5.3]	15.5	13	1450 [684.3]	8080981
RA1660AC1	R801TA075521ZXA	RCF6024STAM	56500 [16.6]	38500 [11.3]	18000 [5.3]	15.5	13	1450 [684.3]	8080993
		RCF6021STAM	56000 [16.1]	36100 [10.6]	18900 [5.5]	15.5	13	1450 [684.3]	8080960
		RCF6024HTAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	7943769
RA1660AC1	R801TA100521MSA	RCF6024STAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	7943798
		RCF6024HTAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	8080982
		RCF6024STAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	8080994
RA1660AC1	R801TA100521ZSA	RCF6024HTAM	56500 [16.6]	38300 [11.2]	18200 [5.3]	15.5	13	1425 [672.5]	7943770
		RCF6024STAM	56500 [16.6]	38300 [11.2]	18200 [5.3]	15.5	13	1425 [672.5]	7943799
		RCF6024HTAM	56500 [16.6]	38300 [11.2]	18200 [5.3]	15.5	13	1425 [672.5]	8080983
RA1660AC1	R801TA100521ZXA	RCF6024STAM	56500 [16.6]	38300 [11.2]	18200 [5.3]	15.5	13	1425 [672.5]	8080995
		RCF6024HTAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	7943771
		RCF6024STAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	7943800
RA1660AC1	R801TA125524MSA	RCF6024HTAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	8080984
		RCF6024STAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	8080996
		RCF6024HTAM	57500 [16.9]	41300 [12.1]	16200 [4.7]	15.1	12.5	1675 [790.5]	7943772
RA1660AC1	R801TA125524ZSA	RCF6024STAM	57500 [16.9]	41300 [12.1]	16200 [4.7]	15.1	12.5	1675 [790.5]	7943801
		RCF6024HTAM	57500 [16.9]	41300 [12.1]	16200 [4.7]	15.1	12.5	1675 [790.5]	8080985
		RCF6024STAM	57500 [16.9]	41300 [12.1]	16200 [4.7]	15.1	12.5	1675 [790.5]	8080997
RA1660AJ1	R801TA075417MSA	RCF6021STAM	54500 [16.0]	35300 [10.3]	19200 [5.6]	15.1	12.5	1400 [660.7]	8081036
		RCF6024HTAM	56500 [16.6]	38300 [11.2]	18200 [5.3]	15.5	13	1425 [672.5]	8081037
		RCF6024STAM	56500 [16.6]	38300 [11.2]	18200 [5.3]	15.5	13	1425 [672.5]	8081058
RA1660AJ1	R801TA075421MSA	RCF6024HTAM	56500 [16.6]	38500 [11.3]	18000 [5.3]	15.5	13	1450 [684.3]	7943547
		RCF6024STAM	56500 [16.6]	38500 [11.3]	18000 [5.3]	15.5	13	1450 [684.3]	7943576
		RCF6024HTAM	56500 [16.6]	38500 [11.3]	18000 [5.3]	15.5	13	1450 [684.3]	8081059
RA1660AJ1	R801TA075521ZXA	RCF6024STAM	56500 [16.6]	38500 [11.3]	18000 [5.3]	15.5	13	1450 [684.3]	8081071
		RCF6024HTAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	8081038
		RCF6024STAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	7943548
RA1660AJ1	R801TA100521MSA	RCF6024HTAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	7943577
		RCF6024STAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	8081060
		RCF6024HTAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	8081072
RA1660AJ1	R801TA125521ZSA	RCF6024STAM	56500 [16.6]	38300 [11.2]	18200 [5.3]	15.5	13	1425 [672.5]	7943549
		RCF6024HTAM	56500 [16.6]	38300 [11.2]	18200 [5.3]	15.5	13	1425 [672.5]	7943578
		RCF6024STAM	56500 [16.6]	38300 [11.2]	18200 [5.3]	15.5	13	1425 [672.5]	8081061
RA1660AJ1	R801TA100521ZXA	RCF6024HTAM	56500 [16.6]	38300 [11.2]	18200 [5.3]	15.5	13	1425 [672.5]	8081073
		RCF6024STAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	7943550
		RCF6024HTAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	7943579
RA1660AJ1	R801TA125524MSA	RCF6024STAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	8081062
		RCF6024HTAM	58000 [17.0]	41600 [12.2]	16400 [4.8]	15.5	13	1650 [778.7]	8081074
		RCF6024STAM	57500 [16.9]	41300 [12.1]	16200 [4.7]	15.1	12.5	1675 [790.5]	7943551
RA1660AJ1	R801TA125524ZSA	RCF6024STAM	57500 [16.9]	41300 [12.1]	16200 [4.7]	15.1	12.5	1675 [790.5]	7943580
		RCF6024HTAM	57500 [16.9]	41300 [12.1]	16200 [4.7]	15.1	12.5	1675 [790.5]	8081063
		RCF6024STAM	57500 [16.9]	41300 [12.1]	16200 [4.7]	15.1	12.5	1675 [790.5]	8081075

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R802V: Ultra 2-Stage 80% EC/Eff Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/h [kW]	Net Sensible BTU/h [kW]	Net Latent BTU/h [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1618AJ1	R802VA050317MSA	RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940298
		RCF2417MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940319
		RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940340
RA1618AJ1	R802VA050317MXA	RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940386
		RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079879
		RCF2417MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079884
RA1618AJ1	R802VA075317MSA	RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079889
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079899
		RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940299
RA1618AJ1	R802VA075317ZSA	RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940320
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940341
		RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940387
RA1618AJ1	R802VA075317MXA	RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079880
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079885
		RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079890
RA1618AJ1	R802VA075317ZSA	RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079900
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940300
		RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940321
RA1618AJ1	R802VA075317ZXA	RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940342
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940368
		RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079881
RA1618AJ1	R802VA075317ZXA	RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079886
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079891
		RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079902
RA1618AJ1	R802VA075421ZSA	RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8108009
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940389
		RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	8079903
RA1618AJ1	R802VA050317MSA	RCF2421HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940360
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079893
		RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940361
RA1618AJ1	R802VA075317MSA	RCF2421HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079894
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940362
		RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079895
RA1618AJ1	R802VA075421ZSA	RCF2421HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8079896
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	8108008
		RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940363
RA1618AJ1	R802VA075421ZXA	RCF2421HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	8079897
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	650 [306.8]	7940377
		RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	775 [365.8]	7940601
RA1624AJ1	R802VA050317MSA	RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	725 [342.2]	7940625
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	775 [365.8]	7940682
		RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	875 [413.0]	8079938
RA1624AJ1	R802VA050317MXA	RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	850 [401.2]	8079943
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	725 [342.2]	8079948
		RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	850 [401.2]	8079959

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R802V: Ultra 2-Stage 80% ECM Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1624AJ1	R802VA075317MSA	RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940578
		RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940602
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940626
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940683
RA1624AJ1	R802VA075317MSA	RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	8079939
		RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	8079944
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	8079949
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	8079960
RA1624AJ1	R802VA075317ZSA	RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940579
		RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940603
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	825 [389.4]	7940627
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940684
RA1624AJ1	R802VA075317ZXA	RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	800 [377.6]	8079940
		RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	800 [377.6]	8079945
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	825 [389.4]	8079950
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	800 [377.6]	8079961
RA1624AJ1	R802VA075421MSA	RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	8079962
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	8103014
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940685
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	875 [413.0]	8079963
RA1624AJ1	R802VA100521MSA	RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	7940686
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	8079964
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	775 [365.8]	7940649
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	850 [401.2]	8079952
RA1624AJ1	R802VA050317MSA	RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940650
		RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	8079953
		RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940651
		RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	800 [377.6]	8079954
RA1624AJ1	R802VA075317ZSA	RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	8079955
		RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	8103013
		RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940652
		RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	875 [413.0]	8079956
RA1624AJ1	R802VA100521MSA	RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	7940653
		RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	8079957
		RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940907
		RCF3617STAM	28200 [8.3]	20900 [6.1]	7300 [2.1]	16	13	975 [460.1]	8080008
RA1630AJ1	R802VA050317MSA	RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	975 [460.1]	7940936
		RCF3621MTAM	29800 [8.7]	20900 [6.1]	6900 [2.6]	16	13	975 [460.1]	7940980
		RCF3621STAM	28200 [8.3]	20900 [6.1]	7300 [2.1]	16	13	875 [413.0]	8080002
		RCF3617STAM	28200 [8.3]	20900 [6.1]	7300 [2.1]	16	13	975 [460.1]	8080035
RA1630AJ1	R802VA050317MSA	RCF3621MTAM	29800 [8.7]	21000 [6.2]	3800 [2.6]	15.5	13	975 [460.1]	8080048
		RCF3621STAM	28200 [8.3]	20900 [6.1]	7300 [2.1]	16	13	1025 [483.7]	7940908
		RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8080009
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	7940937
RA1630AJ1	R802VA075317MSA	RCF3621STAM	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	1025 [483.7]	7940981
		RCF3617STAM	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	1025 [483.7]	8080003
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8080036
		RCF3621STAM	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	1025 [483.7]	8080049

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R802V: Ultra 2-Stage 80% ECM Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1630AJ1	R802VA075317ZSA	RCF3617STAM	28800 [8.4]	21900 [6.4]	6900 [2.0]	16	13	1000 [471.9]	7940909
		RCF3621MTAM	30000 [8.6]	21300 [6.2]	8700 [2.5]	16	13	1050 [495.5]	7940938
		RCF3621STAM	28800 [8.4]	21900 [6.4]	6900 [2.0]	16	13	1000 [471.9]	7940982
RA1630AJ1	R802VA075317ZXA	RCF3617STAM	28800 [8.4]	21900 [6.4]	6900 [2.0]	16	13	1000 [471.9]	8080004
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1000 [471.9]	8080037
		RCF3621STAM	28800 [8.4]	21900 [6.4]	6900 [2.0]	16	13	1000 [471.9]	8080050
RA1630AJ1	R802VA075421MSA	RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8080010
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8080038
		RCF3621STAM	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	1025 [483.7]	8080051
RA1630AJ1	R802VA075421MXA	RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8080059
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8080070
		RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8108017
RA1630AJ1	R802VA075421MXA	RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8108018
		RCF3621STAM	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	1025 [483.7]	8108019
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8108020
RA1630AJ1	R802VA075421ZSA	RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8108022
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	7940939
		RCF3621STAM	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	1025 [483.7]	7940983
RA1630AJ1	R802VA075421ZXA	RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	7941022
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	7941054
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	8080039
RA1630AJ1	R802VA075421ZXA	RCF3621STAM	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	1025 [483.7]	8080052
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8080060
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	8080071
RA1630AJ1	R802VA100521MSA	RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	8080011
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	7940940
		RCF3621STAM	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	1025 [483.7]	7940984
RA1630AJ1	R802VA100521MXA	RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	7941023
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	7941055
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	8080040
RA1630AJ1	R802VA100521MXA	RCF3621STAM	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	1025 [483.7]	8080053
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	8080061
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	8080072
RA1630AJ1	R802VA100521ZSA	RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	7940941
		RCF3621STAM	28800 [8.4]	21800 [6.4]	7000 [2.1]	16	13	975 [460.1]	7940985
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	7941024
RA1630AJ1	R802VA100521ZXA	RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	7941056
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	8080041
		RCF3621STAM	28800 [8.4]	21800 [6.4]	7000 [2.1]	16	13	975 [460.1]	8080054
RA1630AJ1	R802VA125521MSA	RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	8080062
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	8080073
		RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	7941025
RA1630AJ1	R802VA125521MXA	RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	8080063
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	8080074
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	7941026
RA1630AJ1	R802VA125521ZSA	RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	7941058
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8080064
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8080075

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R802V: Ultra 2-Stage 80% ECM Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHR#
RA1636BC1	R802VA050317MSA	RCF3617STAM	35800 [10.5]	25500 [7.5]	10300 [3.0]	14.5	12.2	1100 [519.1]	8177997
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1100 [519.1]	8177924
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1100 [519.1]	8177951
		RCF3621STAM	35800 [10.5]	25500 [7.5]	10300 [3.0]	14.5	12.2	1100 [519.1]	8177999
RA1636BC1	R802VA075317MSA	RCF3617STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1150 [542.7]	8177938
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1150 [542.7]	8177925
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1150 [542.7]	8177952
		RCF3621STAM	35800 [10.5]	25500 [7.5]	10300 [3.0]	14.5	12.5	1150 [542.7]	8178000
RA1636BC1	R802VA075317ZSA	RCF3617STAM	35800 [10.5]	25500 [7.5]	10300 [3.0]	15.1	12.5	1050 [495.5]	8177999
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1050 [495.5]	8177953
		RCF3621MTAM	35800 [10.5]	25500 [7.5]	10300 [3.0]	15.1	12.5	1050 [495.5]	8178001
		RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8177926
RA1636BC1	R802VA075421MSA	RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1125 [530.9]	8177954
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1200 [566.3]	8178002
		RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178047
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1125 [530.9]	8178083
RA1636BC1	R802VA075421ZSA	RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1200 [566.3]	8177955
		RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1200 [566.3]	8178003
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178048
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1200 [566.3]	8178084
RA1636BC1	R802VA100521MSA	RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8177927
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8177956
		RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1250 [589.9]	8178004
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178049
RA1636BC1	R802VA100521ZSA	RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178086
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1250 [589.9]	8177957
		RCF3621STAM	36000 [10.6]	25500 [7.5]	10500 [3.1]	15.5	13	1050 [495.5]	8178005
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178050
RA1636BC1	R802VA125524MSA	RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1250 [589.9]	8178087
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178051
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178088
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178052
RA1636BC1	R802VA125524ZSA	RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1250 [589.9]	8178089
		RCF3617STAM	35800 [10.5]	25500 [7.5]	10300 [3.0]	14.5	12.2	1100 [519.1]	8178428
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1100 [519.1]	8178455
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1100 [519.1]	8178482
RA1636BJ1	R802VA075317MSA	RCF3621STAM	35800 [10.5]	25500 [7.5]	10300 [3.0]	14.5	12.2	1100 [519.1]	8178528
		RCF3617STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1150 [542.7]	8178429
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1150 [542.7]	8178456
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1150 [542.7]	8178483
RA1636BJ1	R802VA075317ZSA	RCF3621MTAM	35600 [10.4]	24800 [7.3]	10800 [3.2]	15.5	13	975 [450.1]	8178529
		RCF3621STAM	35800 [10.5]	25300 [7.4]	10500 [3.1]	15.1	12.5	1050 [495.5]	8178430
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	11000 [3.2]	15.5	13	1050 [495.5]	8178484
		RCF3621MTAM	35800 [10.5]	25300 [7.4]	10500 [3.1]	15.1	12.5	1050 [495.5]	8178530
RA1636BJ1	R802VA075421MSA	RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178457
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1125 [530.9]	8178485
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1200 [566.3]	8178531
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178574
RA1636BJ1	R802VA075421ZSA	RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1125 [530.9]	8178609

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R802V: Ultra 2-Stage 80°F ECM Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1636BJ1	R802VA075421ZSA	RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1200 [566.3]	8178486
		RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1200 [566.3]	8178532
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178575
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1200 [566.3]	8178610
RA1636BJ1	R802VA100521MSA	RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178458
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178487
		RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1250 [589.9]	8178533
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178576
RA1636BJ1	R802VA100521ZSA	RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178611
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1250 [589.9]	8178488
		RCF3621STAM	36000 [10.6]	25500 [7.5]	10500 [3.1]	15.5	13	1050 [495.5]	8178534
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178577
RA1636BJ1	R802VA125524MSA	RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1250 [589.9]	8178612
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178578
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178613
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178579
RA1642AC1	R802VA125524ZSA	RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1250 [589.9]	8178614
		RCF4821MTAM	40500 [11.9]	26400 [7.7]	14100 [4.1]	15.5	13	1100 [519.1]	8080517
		RCF4821STAM	40000 [11.7]	27500 [8.1]	12500 [3.7]	15.1	12.5	1100 [519.1]	7942229
		RCF4821HTAM	40000 [11.7]	27500 [8.1]	12500 [3.7]	15.1	12.5	1100 [519.1]	8080546
RA1642AC1	R802VA050317MXA	RCF4821MTAM	41000 [12.0]	27100 [7.9]	13900 [4.1]	16	13	1150 [542.7]	8080518
		RCF4821STAM	40000 [11.7]	27400 [8.0]	12600 [3.7]	16	13	1075 [507.3]	7942230
		RCF4821HTAM	40000 [11.7]	27400 [8.0]	12600 [3.7]	16	13	1075 [507.3]	8080547
		RCF4821STAM	40000 [11.7]	27500 [8.1]	12500 [3.7]	15.5	13	1100 [519.1]	7942231
RA1642AC1	R802VA075317ZXA	RCF4821STAM	40000 [11.7]	27500 [8.1]	12500 [3.7]	15.5	13	1100 [519.1]	8080548
		RCF4821HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8080519
		RCF4824HTAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	8080549
		RCF4824MTAM	41000 [12.0]	31100 [9.1]	10900 [3.2]	16	13	1475 [696.1]	8080559
RA1642AC1	R802VA075421MSA	RCF4824STAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	8080571
		RCF4821MTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8108053
		RCF4821STAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	8108054
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1475 [696.1]	8108056
RA1642AC1	R802VA075421MXA	RCF4824MTAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	8108057
		RCF4821STAM	41000 [12.0]	29600 [8.7]	11400 [3.3]	15.5	13	1300 [613.5]	7942232
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	7942275
		RCF4821HTAM	41000 [12.0]	29600 [8.7]	11400 [3.3]	15.5	13	1300 [613.5]	7942311
RA1642AC1	R802VA075421ZXA	RCF4821STAM	41000 [12.0]	29600 [8.7]	11400 [3.3]	15.5	13	1300 [613.5]	8080550
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	8080560
		RCF4824MTAM	41000 [12.0]	29600 [8.7]	11400 [3.3]	15.5	13	1300 [613.5]	8080572
		RCF4821HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	8080520
RA1642AC1	R802VA100521MSA	RCF4821MTAM	41500 [12.2]	30700 [9.0]	10800 [3.2]	16	13	1400 [660.7]	7942233
		RCF4821STAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	7942276
		RCF4824HTAM	41500 [12.2]	30700 [9.0]	10800 [3.2]	16	13	1400 [660.7]	7942312
		RCF4824MTAM	41500 [12.2]	30700 [9.0]	10800 [3.2]	16	13	1400 [660.7]	8080551
RA1642AC1	R802VA100521MXA	RCF4821STAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	8080561
		RCF4824HTAM	41500 [12.2]	30700 [9.0]	10800 [3.2]	16	13	1400 [660.7]	8080573
		RCF4824MTAM	40500 [11.9]	28300 [8.3]	12200 [3.6]	16	13	1150 [542.7]	7942234
		RCF4821HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	7942277
RA1642AC1	R802VA100521ZSA	RCF4824HTAM	40500 [11.9]	28300 [8.3]	12200 [3.6]	16	13	1150 [542.7]	7942313

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R802V: Ultra 2-Stage 80% ECM Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHR#
RA1642AC1	R802VA100521ZXA	RCF4821STAM	40500 [11.9]	28300 [8.3]	12200 [3.6]	16	13	1150 [542.7]	8080552
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	8080562
		RCF4824STAM	40500 [11.9]	28300 [8.3]	12200 [3.6]	16	13	1150 [542.7]	8080574
RA1642AC1	R802VA125524MSA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1475 [696.1]	7942278
		RCF4824STAM	42000 [12.3]	31600 [9.3]	10400 [3.0]	16	13	1475 [696.1]	7942314
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1475 [696.1]	8080563
RA1642AC1	R802VA125524MXA	RCF4824STAM	42000 [12.3]	31600 [9.3]	10400 [3.0]	16	13	1475 [696.1]	8080575
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	7942279
		RCF4824STAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	7942315
RA1642AC1	R802VA125524ZXA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	8080564
		RCF4824STAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	8080576
		RCF4821MTAM	40500 [11.9]	26400 [7.7]	14100 [4.1]	15.5	13	1100 [519.1]	8080632
RA1642AJ1	R802VA050317MSA	RCF4821STAM	40000 [11.7]	27500 [8.1]	12500 [3.7]	15.1	12.5	1100 [519.1]	7942565
		RCF4821STAM	40000 [11.7]	27500 [8.1]	12500 [3.7]	15.1	12.5	1100 [519.1]	8080661
		RCF4821MTAM	41000 [12.0]	27100 [7.9]	13900 [4.1]	16	13	1150 [542.7]	8080633
RA1642AJ1	R802VA075317MSA	RCF4821STAM	40000 [11.7]	27400 [8.0]	12600 [3.7]	16	13	1075 [507.3]	7942566
		RCF4821STAM	40000 [11.7]	27400 [8.0]	12600 [3.7]	16	13	1075 [507.3]	8080662
		RCF4821STAM	40000 [11.7]	27500 [8.1]	12500 [3.7]	15.5	13	1100 [519.1]	7942567
RA1642AJ1	R802VA075317ZXA	RCF4821STAM	40000 [11.7]	27500 [8.1]	12500 [3.7]	15.5	13	1100 [519.1]	8080663
		RCF4821MTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8080634
		RCF4821STAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	8080664
RA1642AJ1	R802VA075421MSA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1475 [696.1]	8080674
		RCF4824STAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	8080686
		RCF4821MTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8108063
RA1642AJ1	R802VA075421MXA	RCF4821STAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	8108064
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1475 [696.1]	8108065
		RCF4824STAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	8108066
RA1642AJ1	R802VA075421ZSA	RCF4821STAM	41000 [12.0]	29600 [8.7]	11400 [3.3]	15.5	13	1300 [613.5]	7942568
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	7942611
		RCF4824STAM	41000 [12.0]	29600 [8.7]	11400 [3.3]	15.5	13	1300 [613.5]	7942647
RA1642AJ1	R802VA075421ZXA	RCF4821STAM	41000 [12.0]	29600 [8.7]	11400 [3.3]	15.5	13	1300 [613.5]	8080665
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	8080675
		RCF4824STAM	41000 [12.0]	29600 [8.7]	11400 [3.3]	15.5	13	1300 [613.5]	8080687
RA1642AJ1	R802VA100521MSA	RCF4821MTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	8080635
		RCF4821STAM	41500 [12.2]	30700 [9.0]	10600 [3.2]	16	13	1400 [660.7]	7942569
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	7942612
RA1642AJ1	R802VA100521MXA	RCF4824STAM	41500 [12.2]	30700 [9.0]	10600 [3.2]	16	13	1400 [660.7]	7942648
		RCF4821STAM	41500 [12.2]	30700 [9.0]	10600 [3.2]	16	13	1400 [660.7]	8080666
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	8080676
RA1642AJ1	R802VA100521ZSA	RCF4824STAM	41500 [12.2]	30700 [9.0]	10600 [3.2]	16	13	1400 [660.7]	8080688
		RCF4821MTAM	40500 [11.9]	28300 [8.3]	12200 [3.6]	16	13	1150 [542.7]	7942570
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	7942613
RA1642AJ1	R802VA100521ZXA	RCF4824STAM	40500 [11.9]	28300 [8.3]	12200 [3.6]	16	13	1150 [542.7]	7942649
		RCF4821STAM	40500 [11.9]	28300 [8.3]	12200 [3.6]	16	13	1150 [542.7]	8080667
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	8080677
RA1642AJ1	R802VA125524MSA	RCF4824STAM	40500 [11.9]	28300 [8.3]	12200 [3.6]	16	13	1150 [542.7]	8080689
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1475 [696.1]	7942614
		RCF4824STAM	42000 [12.3]	31600 [9.3]	10400 [3.0]	16	13	1475 [696.1]	7942650

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R802V: Ultra 2-Stage 80% ECM Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1642AJ1	R802VA125524MXA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1475 [696.1]	8080678
		RCF4824STAM	42000 [12.3]	31600 [9.3]	10400 [3.0]	16	13	1475 [696.1]	8080690
RA1642AJ1	R802VA125524ZSA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	7942615
		RCF4824STAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	7942651
RA1642AJ1	R802VA125524ZXA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	8080679
		RCF4824STAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	8080691
RA1648AC1	R802VA050317MSA	RCF4821MTAM	44000 [12.9]	31100 [9.1]	12900 [3.8]	15.1	12.5	1175 [554.5]	8080747
		RCF4821STAM	43000 [12.6]	28700 [8.4]	14300 [4.2]	15.1	12.5	1175 [554.5]	7942900
RA1648AC1	R802VA050317MXA	RCF4821STAM	43000 [12.6]	28700 [8.4]	14300 [4.2]	15.1	12.5	1175 [554.5]	8080770
		RCF4821STAM	43500 [12.7]	29300 [8.6]	14200 [4.2]	15.5	13	1200 [566.3]	7942901
RA1648AC1	R802VA075317ZSA	RCF4821STAM	43500 [12.7]	29300 [8.6]	14200 [4.2]	15.5	13	1200 [566.3]	8080771
		RCF4821STAM	43500 [12.7]	29300 [8.6]	14200 [4.2]	15.5	13	1200 [566.3]	8080771
RA1648AC1	R802VA075317ZXA	RCF4821MTAM	45500 [13.3]	34500 [10.1]	11000 [3.2]	16	13	1475 [696.1]	8080748
		RCF4821STAM	44500 [13.0]	31200 [9.1]	13300 [3.9]	16	13	1350 [637.1]	8080772
RA1648AC1	R802VA075421MSA	RCF4824HTAM	47000 [13.8]	34900 [10.2]	12100 [3.5]	16	13	1600 [755.1]	8080782
		RCF4824STAM	44500 [13.0]	31200 [9.1]	13300 [3.9]	16	13	1350 [637.1]	8080794
RA1648AC1	R802VA075421MXA	RCF4821MTAM	45500 [13.3]	34500 [10.1]	11000 [3.2]	16	13	1475 [696.1]	8108073
		RCF4821STAM	44500 [13.0]	31200 [9.1]	13300 [3.9]	16	13	1350 [637.1]	8108074
RA1648AC1	R802VA075421ZSA	RCF4824HTAM	47000 [13.8]	34900 [10.2]	12100 [3.5]	16	13	1600 [755.1]	8108075
		RCF4824STAM	44500 [13.0]	31200 [9.1]	13300 [3.9]	16	13	1350 [637.1]	8108076
RA1648AC1	R802VA100521MSA	RCF4821STAM	44000 [12.9]	30400 [8.9]	13600 [4.0]	15.5	13	1300 [613.5]	7942902
		RCF4824HTAM	46000 [13.5]	33000 [9.7]	13000 [3.8]	16	13	1450 [684.3]	7942938
RA1648AC1	R802VA100521MXA	RCF4824STAM	44000 [12.9]	30400 [8.9]	13600 [4.0]	15.5	13	1300 [613.5]	7942973
		RCF4821STAM	44000 [12.9]	30400 [8.9]	13600 [4.0]	15.5	13	1300 [613.5]	8080773
RA1648AC1	R802VA100521ZXA	RCF4824HTAM	46000 [13.5]	33000 [9.7]	13000 [3.8]	16	13	1450 [684.3]	8080783
		RCF4824STAM	44000 [12.9]	30400 [8.9]	13600 [4.0]	15.5	13	1300 [613.5]	8080795
RA1648AC1	R802VA100521MSA	RCF4821STAM	46500 [13.6]	36100 [10.6]	10400 [3.0]	16	13	1575 [743.3]	8080749
		RCF4824HTAM	45000 [13.2]	32000 [9.4]	13000 [3.8]	16	13	1400 [660.7]	7942903
RA1648AC1	R802VA100521MXA	RCF4824STAM	45000 [13.2]	32000 [9.4]	13000 [3.8]	16	13	1400 [660.7]	7942974
		RCF4821STAM	45000 [13.2]	32000 [9.4]	13000 [3.8]	16	13	1400 [660.7]	8080774
RA1648AC1	R802VA100521ZSA	RCF4824HTAM	47000 [13.8]	34700 [10.2]	12300 [3.6]	16	13	1575 [743.3]	8080784
		RCF4824STAM	45000 [13.2]	32000 [9.4]	13000 [3.8]	16	13	1400 [660.7]	8080796
RA1648AC1	R802VA100521ZXA	RCF4821STAM	44000 [12.9]	30100 [8.8]	13900 [4.1]	16	13	1250 [589.9]	7942904
		RCF4824HTAM	46500 [13.6]	34400 [10.1]	12100 [3.5]	16	13	1600 [755.1]	7942940
RA1648AC1	R802VA100521MSA	RCF4824STAM	44000 [12.9]	30100 [8.8]	13900 [4.1]	16	13	1250 [589.9]	7942975
		RCF4821STAM	44000 [12.9]	30100 [8.8]	13900 [4.1]	16	13	1250 [589.9]	8080775
RA1648AC1	R802VA125524MXA	RCF4824HTAM	46500 [13.6]	34400 [10.1]	12100 [3.5]	16	13	1600 [755.1]	8080785
		RCF4824STAM	44000 [12.9]	30100 [8.8]	13900 [4.1]	16	13	1250 [589.9]	8080797
RA1648AC1	R802VA125524MSA	RCF4821MTAM	47000 [13.8]	34700 [10.2]	12300 [3.6]	16	13	1575 [743.3]	7942941
		RCF4821STAM	45500 [13.3]	33600 [9.8]	11900 [3.5]	16	13	1575 [743.3]	8080796
RA1648AC1	R802VA125524ZSA	RCF4824HTAM	47000 [13.8]	34700 [10.2]	12300 [3.6]	16	13	1575 [743.3]	8080798
		RCF4824STAM	44500 [13.0]	31100 [9.1]	13400 [3.9]	16	13	1325 [625.3]	7942942
RA1648AC1	R802VA125524ZXA	RCF4824HTAM	47000 [13.8]	34700 [10.2]	12300 [3.6]	16	13	1575 [743.3]	8080787
		RCF4824STAM	44500 [13.0]	31100 [9.1]	13400 [3.9]	16	13	1325 [625.3]	8080799
RA1648AJ1	R802VA050317MSA	RCF4821MTAM	44000 [12.9]	31100 [9.1]	12900 [3.8]	15.1	12.5	1175 [554.5]	8080654
		RCF4821STAM	43000 [12.6]	28700 [8.4]	14300 [4.2]	15.1	12.5	1175 [554.5]	7943226
RA1648AJ1	R802VA050317MXA	RCF4821STAM	43000 [12.6]	28700 [8.4]	14300 [4.2]	15.1	12.5	1175 [554.5]	8080877

[J] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions — Cooling (con't.)

R802V: Ultra 2-Stage 80% ECM Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1648AJ1	R802VA075317ZSA	RCF4821STAM	43500 [12.7]	29300 [8.6]	14200 [4.2]	15.5	13	1200 [566.3]	7943227
RA1648AJ1	R802VA075317ZXA	RCF4821STAM	43500 [12.7]	29300 [8.6]	14200 [4.2]	15.5	13	1200 [566.3]	8080878
		RCF4821MTAM	45500 [13.3]	34500 [10.1]	11000 [3.2]	16	13	1475 [696.1]	8080855
RA1648AJ1	R802VA075421MSA	RCF4821STAM	44500 [13.0]	31200 [9.1]	13300 [3.9]	16	13	1350 [637.1]	8080879
		RCF4824HTAM	47000 [13.8]	34900 [10.2]	12100 [3.5]	16	13	1600 [755.1]	8080889
		RCF4824STAM	44500 [13.0]	31200 [9.1]	13300 [3.9]	16	13	1350 [637.1]	8080901
RA1648AJ1	R802VA075421MXA	RCF4821MTAM	45500 [13.3]	34500 [10.1]	11000 [3.2]	16	13	1475 [696.1]	8108082
		RCF4821STAM	44500 [13.0]	31200 [9.1]	13300 [3.9]	16	13	1350 [637.1]	8108083
		RCF4824HTAM	47000 [13.8]	34900 [10.2]	12100 [3.5]	16	13	1600 [755.1]	8108085
		RCF4824STAM	44500 [13.0]	31200 [9.1]	13300 [3.9]	16	13	1350 [637.1]	8108086
RA1648AJ1	R802VA075421ZSA	RCF4821STAM	44000 [12.9]	30400 [8.9]	13600 [4.0]	15.5	13	1300 [613.5]	7943228
		RCF4824HTAM	46000 [13.5]	33000 [9.7]	13000 [3.8]	16	13	1450 [684.3]	7943264
		RCF4824STAM	44000 [12.9]	30400 [8.9]	13600 [4.0]	15.5	13	1300 [613.5]	7943299
RA1648AJ1	R802VA075421ZXA	RCF4821STAM	44000 [12.9]	30400 [8.9]	13600 [4.0]	15.5	13	1300 [613.5]	8080880
		RCF4824HTAM	46000 [13.5]	33000 [9.7]	13000 [3.8]	16	13	1450 [684.3]	8080890
		RCF4824STAM	44000 [12.9]	30400 [8.9]	13600 [4.0]	15.5	13	1300 [613.5]	8080902
RA1648AJ1	R802VA100521MSA	RCF4821MTAM	46500 [13.6]	36100 [10.6]	10400 [3.0]	16	13	1575 [743.3]	8080856
		RCF4821STAM	45000 [13.2]	32000 [9.4]	13000 [3.8]	16	13	1400 [660.7]	7943229
		RCF4824HTAM	47000 [13.8]	34700 [10.2]	12300 [3.6]	16	13	1575 [743.3]	7943265
		RCF4824STAM	45000 [13.2]	32000 [9.4]	13000 [3.8]	16	13	1400 [660.7]	7943300
RA1648AJ1	R802VA100521MXA	RCF4821STAM	45000 [13.2]	32000 [9.4]	13000 [3.8]	16	13	1400 [660.7]	8080881
		RCF4824HTAM	47000 [13.8]	34700 [10.2]	12300 [3.6]	16	13	1575 [743.3]	8080891
		RCF4824STAM	45000 [13.2]	32000 [9.4]	13000 [3.8]	16	13	1400 [660.7]	8080903
RA1648AJ1	R802VA100521ZSA	RCF4821STAM	44000 [12.9]	30100 [8.8]	13900 [4.1]	16	13	1250 [589.9]	7943230
		RCF4824HTAM	46500 [13.6]	34400 [10.1]	12100 [3.5]	16	13	1600 [755.1]	7943266
		RCF4824STAM	44000 [12.9]	30100 [8.8]	13900 [4.1]	16	13	1250 [589.9]	7943301
RA1648AJ1	R802VA100521ZXA	RCF4821STAM	44000 [12.9]	30100 [8.8]	13900 [4.1]	16	13	1250 [589.9]	8080882
		RCF4824HTAM	46500 [13.6]	34400 [10.1]	12100 [3.5]	16	13	1600 [755.1]	8080892
		RCF4824STAM	44000 [12.9]	30100 [8.8]	13900 [4.1]	16	13	1250 [589.9]	8080904
RA1648AJ1	R802VA125524MSA	RCF4824HTAM	47000 [13.8]	34700 [10.2]	12300 [3.6]	16	13	1575 [743.3]	7943267
		RCF4824STAM	45500 [13.3]	33600 [9.8]	11900 [3.5]	16	13	1575 [743.3]	7943302
RA1648AJ1	R802VA125524MXA	RCF4824HTAM	47000 [13.8]	34700 [10.2]	12300 [3.6]	16	13	1575 [743.3]	8080893
		RCF4824STAM	45500 [13.3]	33600 [9.8]	11900 [3.5]	16	13	1575 [743.3]	8080905
RA1648AJ1	R802VA125524ZSA	RCF4824HTAM	47000 [13.8]	34700 [10.2]	12300 [3.6]	16	13	1575 [743.3]	7943268
		RCF4824STAM	44500 [13.0]	31100 [9.1]	13400 [3.9]	16	13	1325 [625.3]	7943303
RA1648AJ1	R802VA125524ZXA	RCF4824HTAM	47000 [13.8]	34700 [10.2]	12300 [3.6]	16	13	1575 [743.3]	8080894
		RCF4824STAM	44500 [13.0]	31100 [9.1]	13400 [3.9]	16	13	1325 [625.3]	8080906
RA1660AC1	R802VA075421MSA	RCF6021STAM	55500 [16.3]	37700 [11.0]	17800 [5.2]	15.1	12.5	1600 [755.1]	8080961
		RCF6024HTAM	57500 [16.9]	40700 [11.9]	16800 [4.9]	15.5	13	1600 [755.1]	8080986
		RCF6024STAM	57500 [16.9]	40700 [11.9]	16800 [4.9]	15.5	13	1600 [755.1]	8080998
RA1660AC1	R802VA075421MXA	RCF6021STAM	55500 [16.3]	37700 [11.0]	17800 [5.2]	15.1	12.5	1600 [755.1]	8108092
		RCF6024HTAM	57500 [16.9]	40700 [11.9]	16800 [4.9]	15.5	13	1600 [755.1]	8108093
		RCF6024STAM	57500 [16.9]	40700 [11.9]	16800 [4.9]	15.5	13	1600 [755.1]	8108094
RA1660AC1	R802VA075421ZSA	RCF6024HTAM	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1550 [731.5]	7943773
		RCF6024STAM	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1550 [731.5]	7943802
RA1660AC1	R802VA075421ZXA	RCF6024HTAM	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1550 [731.5]	8080987
		RCF6024STAM	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1550 [731.5]	8080999

I] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R802V: Ultra 2-Stage 80% ECM Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1660AC1	R802VA100521MSA	RCF6021STAM	55500 [16.3]	37100 [10.9]	18400 [5.4]	15.5	13	1525 [719.7]	8080962
		RCF6024HTAM	58000 [17.0]	42200 [12.4]	15800 [4.6]	15.5	13	1725 [814.1]	7943774
		RCF6024STAM	58000 [17.0]	42200 [12.4]	15800 [4.6]	15.5	13	1725 [814.1]	7943803
RA1660AC1	R802VA100521MXA	RCF6024HTAM	58000 [17.0]	42200 [12.4]	15800 [4.6]	15.5	13	1725 [814.1]	8080988
		RCF6024STAM	58000 [17.0]	42200 [12.4]	15800 [4.6]	15.5	13	1725 [814.1]	8081000
		RCF6024HTAM	57000 [16.7]	39400 [11.5]	17600 [5.2]	15.5	13	1500 [707.9]	7943775
RA1660AC1	R802VA100521ZSA	RCF6024STAM	57000 [16.7]	39400 [11.5]	17600 [5.2]	15.5	13	1500 [707.9]	7943804
RA1660AC1	R802VA100521ZXA	RCF6024HTAM	57000 [16.7]	39400 [11.5]	17600 [5.2]	15.5	13	1500 [707.9]	8080989
		RCF6024STAM	57000 [16.7]	39400 [11.5]	17600 [5.2]	15.5	13	1500 [707.9]	8081001
		RCF6024HTAM	57500 [16.9]	40100 [11.8]	17400 [5.1]	16	13	1525 [719.7]	7943776
RA1660AC1	R802VA125524MSA	RCF6024STAM	57500 [16.9]	40100 [11.8]	17400 [5.1]	16	13	1525 [719.7]	7943805
		RCF6024HTAM	57500 [16.9]	40100 [11.8]	17400 [5.1]	16	13	1525 [719.7]	8080990
		RCF6024STAM	57000 [16.7]	39600 [11.6]	17400 [5.1]	15.5	13	1525 [719.7]	8081002
RA1660AC1	R802VA125524ZSA	RCF6024HTAM	57000 [16.7]	39600 [11.6]	17400 [5.1]	15.5	13	1525 [719.7]	7943777
RA1660AC1	R802VA125524ZXA	RCF6024STAM	57000 [16.7]	39600 [11.6]	17400 [5.1]	15.5	13	1525 [719.7]	7943806
		RCF6024HTAM	57000 [16.7]	39600 [11.6]	17400 [5.1]	15.5	13	1525 [719.7]	8080991
		RCF6024STAM	57000 [16.7]	39600 [11.6]	17400 [5.1]	15.5	13	1525 [719.7]	8081003
RA1660AJ1	R802VA075421MSA	RCF6021STAM	55500 [16.3]	37700 [11.0]	17800 [5.2]	15.1	12.5	1600 [755.1]	8081039
		RCF6024HTAM	57500 [16.9]	40700 [11.9]	16800 [4.9]	15.5	13	1600 [755.1]	8081064
		RCF6024STAM	57500 [16.9]	40700 [11.9]	16800 [4.9]	15.5	13	1600 [755.1]	8081076
RA1660AJ1	R802VA075421MXA	RCF6021STAM	55500 [16.3]	37700 [11.0]	17800 [5.2]	15.1	12.5	1600 [755.1]	8108098
		RCF6024HTAM	57500 [16.9]	40700 [11.9]	16800 [4.9]	15.5	13	1600 [755.1]	8108099
		RCF6024STAM	57500 [16.9]	40700 [11.9]	16800 [4.9]	15.5	13	1600 [755.1]	8108101
RA1660AJ1	R802VA075421ZSA	RCF6024HTAM	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1550 [731.5]	7943552
		RCF6024STAM	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1550 [731.5]	7943581
		RCF6024HTAM	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1550 [731.5]	8081065
RA1660AJ1	R802VA075421ZXA	RCF6024STAM	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1550 [731.5]	8081077
		RCF6021STAM	55500 [16.3]	37100 [10.9]	18400 [5.4]	15.5	13	1525 [719.7]	8081040
		RCF6024HTAM	58000 [17.0]	42200 [12.4]	15800 [4.6]	15.5	13	1725 [814.1]	7943553
RA1660AJ1	R802VA100521MSA	RCF6024STAM	58000 [17.0]	42200 [12.4]	15800 [4.6]	15.5	13	1725 [814.1]	7943582
		RCF6024HTAM	58000 [17.0]	42200 [12.4]	15800 [4.6]	15.5	13	1725 [814.1]	8081066
		RCF6024STAM	58000 [17.0]	42200 [12.4]	15800 [4.6]	15.5	13	1725 [814.1]	8081078
RA1660AJ1	R802VA100521MXA	RCF6024HTAM	57000 [16.7]	39400 [11.5]	17600 [5.2]	15.5	13	1500 [707.9]	7943554
		RCF6024STAM	57000 [16.7]	39400 [11.5]	17600 [5.2]	15.5	13	1500 [707.9]	7943583
		RCF6024HTAM	57000 [16.7]	39400 [11.5]	17600 [5.2]	15.5	13	1500 [707.9]	8081067
RA1660AJ1	R802VA100521ZXA	RCF6024STAM	57000 [16.7]	39400 [11.5]	17600 [5.2]	15.5	13	1500 [707.9]	8081079
		RCF6024HTAM	57500 [16.9]	40100 [11.8]	17400 [5.1]	16	13	1525 [719.7]	7943555
		RCF6024STAM	57500 [16.9]	40100 [11.8]	17400 [5.1]	16	13	1525 [719.7]	7943584
RA1660AJ1	R802VA125524MSA	RCF6024HTAM	57500 [16.9]	40100 [11.8]	17400 [5.1]	16	13	1525 [719.7]	8081068
		RCF6024STAM	57500 [16.9]	40100 [11.8]	17400 [5.1]	16	13	1525 [719.7]	8081080
		RCF6024HTAM	57000 [16.7]	39600 [11.6]	17400 [5.1]	15.5	13	1525 [719.7]	7943556
RA1660AJ1	R802VA125524ZSA	RCF6024STAM	57000 [16.7]	39600 [11.6]	17400 [5.1]	15.5	13	1525 [719.7]	7943585
		RCF6024HTAM	57000 [16.7]	39600 [11.6]	17400 [5.1]	15.5	13	1525 [719.7]	8081069
		RCF6024STAM	57000 [16.7]	39600 [11.6]	17400 [5.1]	15.5	13	1525 [719.7]	8081081

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R95T: 95% AFUE single-stage Constant Torque Multipurpose Gas Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/h [kW]	Net Sensible BTU/h [kW]	Net Latent BTU/h [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1618AJ1	R95TA0401317MSA	RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940301
		RCF2417MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940322
		RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940343
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940390
		RCF2421HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940364
RA1624AJ1	R95TA0401317MSA	RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940580
		RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940604
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940628
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940687
		RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940581
RA1624AJ1	R95TA0601317MSA	RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	875 [413.0]	7940605
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	875 [413.0]	7940629
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	875 [413.0]	7940688
		RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	875 [413.0]	7940582
		RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	875 [413.0]	7940606
RA1624AJ1	R95TA0701317MSA	RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	825 [389.4]	7940630
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	825 [389.4]	7940689
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	825 [389.4]	7940654
		RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	825 [389.4]	7940655
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	825 [389.4]	7940656
RA1630AJ1	R95TA0701317MSA	RCF3617STAM	28400 [8.3]	21200 [6.2]	7200 [2.1]	16	13	925 [436.6]	7940910
		RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1000 [471.9]	8080012
		RCF3621MTAM	29800 [8.7]	20800 [6.1]	9000 [2.6]	16	13	950 [448.4]	7940942
		RCF3621STAM	28600 [8.4]	21500 [6.3]	7100 [2.1]	16	13	950 [448.4]	7940986
		RCF3617STAM	28200 [8.3]	20800 [6.1]	7400 [2.2]	16	13	850 [401.2]	7940911
RA1630AJ1	R95TA0601317MSA	RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	925 [436.6]	8080013
		RCF3621MTAM	30000 [8.8]	21300 [6.2]	8700 [2.5]	16	13	1050 [495.5]	7940943
		RCF3621STAM	28400 [8.3]	21200 [6.2]	7200 [2.1]	16	13	900 [424.8]	7940987
		RCF3617STAM	28000 [8.2]	20600 [6.0]	7400 [2.2]	16	13	850 [401.2]	7940912
		RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	975 [460.1]	8080014
RA1636BC1	R95TA0701317MSA	RCF3621MTAM	29600 [8.7]	20600 [6.0]	9000 [2.6]	16	13	950 [448.4]	7940944
		RCF3621STAM	28200 [8.3]	20900 [6.1]	7300 [2.1]	16	13	875 [413.0]	7940988
		RCF3617STAM	35800 [10.5]	25300 [7.4]	10500 [3.1]	15.1	12.5	1050 [495.5]	8177900
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1200 [566.3]	8177928
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1100 [519.1]	8177958
RA1636BC1	R95TA0601317MSA	RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1075 [507.3]	8178006
		RCF3617STAM	35400 [10.4]	24700 [7.2]	10700 [3.1]	14.5	12.2	1000 [471.9]	8177901
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1075 [507.3]	8177929
		RCF3621MTAM	36000 [10.6]	25000 [7.3]	11000 [3.2]	15.1	12.5	1050 [495.5]	8177959
		RCF3621STAM	35600 [10.4]	25000 [7.3]	10600 [3.1]	14.5	12.2	1025 [483.7]	8178007
RA1636BC1	R95TA0701317MSA	RCF3617STAM	35600 [10.4]	25000 [7.3]	10600 [3.1]	14.5	12.2	1025 [483.7]	8177902
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1075 [507.3]	8177930
		RCF3621MTAM	36000 [10.6]	25200 [7.4]	10800 [3.2]	15.1	12.5	1075 [507.3]	8177980
		RCF3621STAM	35800 [10.5]	25500 [7.5]	10300 [3.0]	14.5	12.2	1100 [519.1]	8178008
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15	12.5	1275 [601.7]	8178090
RA1636BC1	R95TA0401317MSA	RCF3617STAM	35800 [10.5]	25300 [7.4]	10500 [3.1]	15.1	12.5	1050 [495.5]	8178431
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1200 [566.3]	8178459
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1100 [519.1]	8178489
		RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1075 [507.3]	8178535
		RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1075 [507.3]	8178535

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R95: 95% AFUE single-stage Constant Torque Multipurpose Gas Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/h [kW]	Net Sensible BTU/h [kW]	Net Latent BTU/h [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1636BJ1	R95TA0601317MSA	RCF3617STAM	35400 [10.4]	24700 [7.2]	10700 [3.1]	14.5	12.2	1000 [471.9]	8178432
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1075 [507.3]	8178460
		RCF3621MTAM	36000 [10.6]	25000 [7.3]	11000 [3.2]	15.1	12.5	1050 [495.5]	8178490
		RCF3621STAM	35600 [10.4]	25000 [7.3]	10600 [3.1]	14.5	12.2	1025 [483.7]	8178536
RA1636BJ1	R95TA0701317MSA	RCF3617STAM	35600 [10.4]	25000 [7.3]	10600 [3.1]	14.5	12.2	1025 [483.7]	8178433
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1075 [507.3]	8178461
		RCF3621MTAM	36000 [10.6]	25200 [7.4]	10800 [3.2]	15.1	12.5	1075 [507.3]	8178491
		RCF3621STAM	35800 [10.5]	25500 [7.5]	10300 [3.0]	14.5	12.2	1100 [519.1]	8178537
RA1636BJ1	R95TA1151524MSA	RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15	12.5	1275 [601.7]	8178615
RA1642AC1	R95TA0401317MSA	RCF4821MTAM	41000 [12.0]	27000 [7.9]	14000 [4.1]	16	13	1125 [530.9]	8080521
RA1642AC1	R95TA0601317MSA	RCF4821MTAM	40600 [11.7]	27500 [8.1]	12500 [3.7]	15.5	13	1100 [519.1]	7942235
RA1642AC1	R95TA0851521MSA	RCF4821MTAM	41600 [12.0]	27700 [8.1]	13300 [3.9]	15.1	12.5	1250 [588.9]	8080522
RA1642AC1	R95TA0701317MSA	RCF4821MTAM	40500 [11.9]	28700 [8.4]	11800 [3.5]	14.5	12.2	1225 [578.1]	7942236
RA1642AC1	R95TA0851521MSA	RCF4821MTAM	41000 [12.0]	27100 [7.9]	13900 [4.1]	15.1	12.5	1150 [542.7]	8080523
RA1642AC1	R95TA0851521MSA	RCF4821STAM	40000 [11.7]	27400 [8.0]	12600 [3.7]	15.1	12.5	1075 [507.3]	7942237
RA1642AC1	R95TA0851521MSA	RCF4821MTAM	42000 [12.3]	29200 [8.6]	12800 [3.8]	15.5	13	1350 [637.1]	8080524
RA1642AC1	R95TA0851521MSA	RCF4821STAM	41000 [12.0]	29800 [8.7]	11200 [3.3]	15.1	12.5	1325 [625.3]	7942238
RA1642AC1	R95TA0851521MSA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1350 [637.1]	7942280
RA1642AC1	R95TA0851521MSA	RCF4824STAM	41000 [12.0]	29800 [8.7]	11200 [3.3]	15.1	12.5	1325 [625.3]	7942316
RA1642AC1	R95TA1001521MSA	RCF4821MTAM	42000 [12.3]	29600 [8.7]	12400 [3.6]	15.5	13	1425 [672.5]	8080525
RA1642AC1	R95TA1001521MSA	RCF4821STAM	41000 [12.0]	30200 [8.9]	10800 [3.2]	15.1	12.5	1400 [660.7]	7942239
RA1642AC1	R95TA1001521MSA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	15.5	13	1425 [672.5]	7942281
RA1642AC1	R95TA1001521MSA	RCF4824STAM	41000 [12.0]	29000 [8.5]	11500 [3.4]	15.1	12.5	1400 [660.7]	7942317
RA1642AJ1	R95TA0401317MSA	RCF4821MTAM	40000 [11.7]	27500 [8.1]	12500 [3.7]	15.5	13	1100 [519.1]	7942571
RA1642AJ1	R95TA0601317MSA	RCF4821MTAM	41000 [12.0]	27700 [8.1]	13300 [3.9]	15.1	12.5	1250 [588.9]	8080637
RA1642AJ1	R95TA0601317MSA	RCF4821STAM	40500 [11.9]	28700 [8.4]	11800 [3.5]	14.5	12.2	1225 [578.1]	7942572
RA1642AJ1	R95TA0701317MSA	RCF4821MTAM	41000 [12.0]	27100 [7.9]	13900 [4.1]	15.1	12.5	1150 [542.7]	8080638
RA1642AJ1	R95TA0851521MSA	RCF4821STAM	40000 [11.7]	27400 [8.0]	12600 [3.7]	15.1	12.5	1075 [507.3]	7942573
RA1642AJ1	R95TA0851521MSA	RCF4821MTAM	42000 [12.3]	29200 [8.6]	12800 [3.8]	15.5	13	1350 [637.1]	8080639
RA1642AJ1	R95TA0851521MSA	RCF4821STAM	41000 [12.0]	29800 [8.7]	11200 [3.3]	15.1	12.5	1325 [625.3]	7942574
RA1642AJ1	R95TA0851521MSA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1350 [637.1]	7942616
RA1642AJ1	R95TA0851521MSA	RCF4824STAM	41000 [12.0]	29800 [8.7]	11200 [3.3]	15.1	12.5	1325 [625.3]	7942652
RA1642AJ1	R95TA1001521MSA	RCF4821MTAM	42000 [12.3]	29600 [8.7]	12400 [3.6]	15.5	13	1425 [672.5]	8080640
RA1642AJ1	R95TA1001521MSA	RCF4821STAM	41000 [12.0]	30200 [8.9]	10800 [3.2]	15.1	12.5	1400 [660.7]	7942575
RA1642AJ1	R95TA1001521MSA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	15.5	13	1425 [672.5]	7942617
RA1642AJ1	R95TA1001521MSA	RCF4824STAM	41000 [12.0]	30200 [8.9]	10800 [3.2]	15.1	12.5	1400 [660.7]	7942653
RA1642AJ1	R95TA1151524MSA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1300 [613.5]	7942618
RA1642AJ1	R95TA1151524MSA	RCF4824STAM	40500 [11.9]	29000 [8.5]	11500 [3.4]	15.1	12.5	1275 [601.7]	7942654
RA1648AC1	R95TA0601317MSA	RCF4821MTAM	44000 [12.9]	31400 [9.2]	12600 [3.7]	15.1	12.5	1225 [578.1]	8080750
RA1648AC1	R95TA0601317MSA	RCF4821STAM	43500 [12.7]	29500 [8.6]	14000 [4.1]	15.1	12.5	1225 [578.1]	7942905
RA1648AC1	R95TA0701317MSA	RCF4821MTAM	44000 [12.9]	31200 [9.1]	12800 [3.8]	15.1	12.5	1200 [566.3]	8080751
RA1648AC1	R95TA0851521MSA	RCF4821MTAM	45000 [13.2]	33000 [9.7]	12000 [3.5]	15.5	13	1325 [625.3]	8080752
RA1648AC1	R95TA0851521MSA	RCF4821STAM	44000 [12.9]	31000 [9.1]	13000 [3.8]	15.1	12.5	1400 [660.7]	7942906
RA1648AC1	R95TA0851521MSA	RCF4824HTAM	45500 [13.3]	31800 [9.3]	13700 [4.0]	16	13	1350 [637.1]	7942943
RA1648AC1	R95TA0851521MSA	RCF4824STAM	44000 [12.9]	31000 [9.1]	13000 [3.8]	15.1	12.5	1400 [660.7]	7942978

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R95T: 95% AFUE single-stage Constant Torque Multiphase Gas Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/h [kW]	Net Sensible BTU/h [kW]	Net Latent BTU/h [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1648AC1	R95TA1001521MSA	RCF4821MTAM	45000 [13.2]	33500 [9.8]	11500 [3.4]	15.5	13	1400 [660.7]	8080753
		RCF4821STAM	44000 [12.9]	30900 [9.1]	13100 [3.8]	15.1	12.5	1375 [648.9]	7942907
		RCF4824HTAM	46000 [13.5]	32800 [9.6]	13200 [3.9]	16	13	1425 [672.5]	7942944
		RCF4824STAM	44000 [12.9]	30900 [9.1]	13100 [3.8]	15.1	12.5	1375 [648.9]	7942979
RA1648AC1	R95TA1151524MSA	RCF4824HTAM	45500 [13.3]	31500 [9.2]	14000 [4.1]	16	13	1300 [613.5]	7942945
		RCF4824STAM	44000 [12.9]	30300 [8.9]	13700 [4.0]	15.5	13	1275 [601.7]	7942980
RA1648AJ1	R95TA0601317MSA	RCF4821MTAM	44000 [12.9]	31400 [9.2]	12600 [3.7]	15.1	12.5	1225 [578.1]	8080857
		RCF4821STAM	43500 [12.7]	29500 [8.6]	14000 [4.1]	15.1	12.5	1225 [578.1]	7943231
RA1648AJ1	R95TA0701317MSA	RCF4821MTAM	44000 [12.9]	31200 [9.1]	12800 [3.8]	15.1	12.5	1200 [566.3]	8080858
		RCF4821STAM	45000 [13.2]	33000 [9.7]	12000 [3.5]	15.5	13	1325 [625.3]	8080859
RA1648AJ1	R95TA0851521MSA	RCF4821MTAM	44000 [12.9]	31000 [9.1]	13000 [3.8]	15.1	12.5	1400 [660.7]	7943232
		RCF4824HTAM	45500 [13.3]	31800 [9.3]	13700 [4.0]	16	13	1350 [637.1]	7943269
		RCF4824STAM	44000 [12.9]	31000 [9.1]	13000 [3.8]	15.1	12.5	1400 [660.7]	7943304
		RCF4821MTAM	45000 [13.2]	33500 [9.8]	11500 [3.4]	15.5	13	1400 [660.7]	8080860
RA1648AJ1	R95TA1001521MSA	RCF4821STAM	44000 [12.9]	30900 [9.1]	13100 [3.8]	15.1	12.5	1375 [648.9]	7943233
		RCF4824HTAM	46000 [13.5]	32800 [9.6]	13200 [3.9]	16	13	1425 [672.5]	7943270
		RCF4824STAM	44000 [12.9]	30900 [9.1]	13100 [3.8]	15.1	12.5	1375 [648.9]	7943305
RA1648AJ1	R95TA1151524MSA	RCF4824HTAM	45500 [13.3]	31500 [9.2]	14000 [4.1]	16	13	1300 [613.5]	7943271
		RCF4824STAM	44000 [12.9]	30300 [8.9]	13700 [4.0]	15.5	13	1275 [601.7]	7943306
RA1660AC1	R95TA0851521MSA	RCF6021STAM	54000 [15.8]	34600 [10.1]	19400 [5.7]	15	12.5	1375 [648.9]	8080963
		RCF6024HTAM	56500 [16.6]	38700 [11.3]	17800 [5.2]	15.1	12.5	1475 [696.1]	7943778
		RCF6024STAM	56500 [16.6]	38700 [11.3]	17800 [5.2]	15.1	12.5	1475 [696.1]	7943807
		RCF6021STAM	54500 [16.0]	35400 [10.4]	19100 [5.6]	15	12.5	1425 [672.5]	8080964
RA1660AC1	R95TA1001521MSA	RCF6024HTAM	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1550 [731.5]	7943779
		RCF6024STAM	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1550 [731.5]	7943808
RA1660AC1	R95TA1151524MSA	RCF6024HTAM	56000 [16.4]	37800 [11.1]	18200 [5.3]	15.1	12.5	1425 [672.5]	7943780
		RCF6024STAM	56000 [16.4]	37800 [11.1]	18200 [5.3]	15.1	12.5	1425 [672.5]	7943809
RA1660AJ1	R95TA0851521MSA	RCF6021STAM	54000 [15.8]	34600 [10.1]	19400 [5.7]	15	12.5	1375 [648.9]	8081041
		RCF6024HTAM	56500 [16.6]	38700 [11.3]	17800 [5.2]	15.1	12.5	1475 [696.1]	7943557
		RCF6024STAM	56500 [16.6]	38700 [11.3]	17800 [5.2]	15.1	12.5	1475 [696.1]	7943586
		RCF6021STAM	54500 [16.0]	35400 [10.4]	19100 [5.6]	15	12.5	1425 [672.5]	8081042
RA1660AJ1	R95TA1001521MSA	RCF6024HTAM	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1550 [731.5]	7943558
		RCF6024STAM	56500 [16.6]	39100 [11.5]	17400 [5.1]	15.1	12.5	1550 [731.5]	7943587
RA1660AJ1	R95TA1151524MSA	RCF6024HTAM	56000 [16.4]	37800 [11.1]	18200 [5.3]	15.1	12.5	1425 [672.5]	7943559
		RCF6024STAM	56000 [16.4]	37800 [11.1]	18200 [5.3]	15.1	12.5	1425 [672.5]	7943588

[J] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R96V: 95% AFUE 2-stage Variable Speed Multipoint Gas Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1618AJ1	R96VA0402317MSA	RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940302
		RCF2417MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940323
		RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940344
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940391
RA1618AJ1	R96VA0602317MSA	RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940303
		RCF2417MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940324
		RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940345
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940392
RA1618AJ1	R96VA0702317MSA	RCF2417HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940304
		RCF2417MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940325
		RCF2417STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940346
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940393
RA1618AJ1	R96VA0852521MSB	RCF2421HTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	675 [318.6]	7940365
		RCF2421MTAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940366
		RCF2421STAM	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	650 [306.8]	7940367
		RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940383
RA1624AJ1	R96VA0402317MSA	RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	7940607
		RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	750 [354.0]	7940631
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	7940690
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	850 [401.2]	7940584
RA1624AJ1	R96VA0602317MSA	RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	850 [401.2]	7940608
		RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	850 [401.2]	7940632
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	850 [401.2]	7940691
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	800 [377.6]	7940585
RA1624AJ1	R96VA0702317MSA	RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	800 [377.6]	7940609
		RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	775 [365.8]	7940633
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	800 [377.6]	7940692
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	800 [377.6]	7940693
RA1624AJ1	R96VA0852521MSB	RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940694
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	850 [401.2]	7940657
		RCF2421STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	850 [401.2]	7940658
		RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	800 [377.6]	7940659
RA1630AJ1	R96VA0852521MSB	RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	800 [377.6]	7940660
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940661
		RCF2421STAM	28500 [8.4]	21500 [6.3]	7100 [2.1]	16	13	950 [448.4]	7940913
		RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1025 [483.7]	8080015
RA1630AJ1	R96VA0402317MSA	RCF3621HTAM	30000 [8.8]	21300 [6.2]	8700 [2.5]	16	13	1025 [483.7]	7940945
		RCF3621MTAM	28500 [8.4]	21500 [6.3]	7100 [2.1]	16	13	950 [448.4]	7940989
		RCF3617STAM	28200 [8.3]	21000 [6.2]	7200 [2.1]	16	13	900 [424.8]	7940914
		RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	975 [460.1]	8080016
RA1630AJ1	R96VA0602317MSA	RCF3621HTAM	30000 [8.8]	21300 [6.2]	8700 [2.5]	16	13	1050 [495.5]	7940946
		RCF3621MTAM	28400 [8.3]	21200 [6.2]	7200 [2.1]	16	13	900 [424.8]	7940990
		RCF3617STAM	28500 [8.4]	21500 [6.3]	7100 [2.1]	16	13	950 [448.4]	7940915
		RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	8080017
RA1630AJ1	R96VA0702317MSA	RCF3621HTAM	30000 [8.8]	21300 [6.2]	8700 [2.5]	16	13	1050 [495.5]	7940947
		RCF3621STAM	28500 [8.4]	21500 [6.3]	7100 [2.1]	16	13	950 [448.4]	7940991

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R96V: 96% AFUE 2-stage Variable Speed Multiphase Gas Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1630AJ1	R96VA0852521MSB	RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	8080018
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	7940948
		RCF3621STAM	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	1025 [483.7]	7940992
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	7941027
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	7941059
RA1630AJ1	R96VA1002521MSA	RCF3621HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	8080019
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	7940949
		RCF3621STAM	29000 [8.5]	22100 [6.5]	6900 [2.0]	16	13	1000 [471.9]	7940993
		RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	7941028
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	7941060
RA1630AJ1	R96VA1152524MSA	RCF3624HTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	7941029
		RCF3624MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1050 [495.5]	7941061
		RCF3617STAM	35400 [10.4]	24500 [7.2]	10900 [3.2]	15.1	12.5	950 [448.4]	8177903
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1125 [530.9]	8177931
		RCF3621MTAM	36000 [10.6]	24900 [7.3]	11100 [3.3]	15.5	13	1025 [483.7]	8177961
RA1636BC1	R96VA0402317MSA	RCF3621STAM	35800 [10.5]	25200 [7.4]	10600 [3.1]	15.1	12.5	1025 [483.7]	8178009
		RCF3617STAM	35200 [10.3]	24300 [7.1]	10900 [3.2]	15	12.5	950 [448.4]	8177904
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1050 [495.5]	8177932
		RCF3621MTAM	36000 [10.6]	25000 [7.3]	11000 [3.2]	15.1	12.5	1050 [495.5]	8177962
		RCF3621STAM	35400 [10.4]	24600 [7.2]	10800 [3.2]	15	12.5	975 [460.1]	8178011
RA1636BC1	R96VA0702317MSA	RCF3617STAM	35400 [10.4]	24500 [7.2]	10900 [3.2]	15.1	12.5	950 [448.4]	8177905
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1150 [542.7]	8177933
		RCF3621MTAM	35600 [10.4]	24200 [7.1]	11400 [3.3]	15.5	13	950 [448.4]	8177963
		RCF3621STAM	35400 [10.4]	24500 [7.2]	10900 [3.2]	15.1	12.5	950 [448.4]	8178012
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1275 [601.7]	8177934
RA1636BC1	R96VA0852521MSB	RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1150 [542.7]	8177964
		RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1150 [542.7]	8178013
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1275 [601.7]	8178053
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1150 [542.7]	8178091
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8177935
RA1636BC1	R96VA1002521MSA	RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8177966
		RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1200 [566.3]	8178014
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178054
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8178092
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178055
RA1636BC1	R96VA1152524MSA	RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1100 [519.1]	8178093
		RCF3617STAM	35400 [10.4]	24500 [7.2]	10900 [3.2]	15.1	12.5	950 [448.4]	8178434
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1125 [530.9]	8178462
		RCF3621MTAM	36000 [10.6]	24900 [7.3]	11100 [3.3]	15.5	13	1025 [483.7]	8178492
		RCF3621STAM	35800 [10.5]	25200 [7.4]	10600 [3.1]	15.1	12.5	1025 [483.7]	8178538
RA1636BJ1	R96VA0602317MSA	RCF3617STAM	35200 [10.3]	24300 [7.1]	10900 [3.2]	15	12.5	950 [448.4]	8178435
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1050 [495.5]	8178463
		RCF3621MTAM	36000 [10.6]	25000 [7.3]	11000 [3.2]	15.1	12.5	1050 [495.5]	8178493
		RCF3621STAM	35400 [10.4]	24600 [7.2]	10800 [3.2]	15	12.5	975 [460.1]	8178539
		RCF3617STAM	35400 [10.4]	24500 [7.2]	10900 [3.2]	15.1	12.5	950 [448.4]	8178436
RA1636BJ1	R96VA0702317MSA	RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1150 [542.7]	8178464
		RCF3621MTAM	35800 [10.4]	24200 [7.1]	11400 [3.3]	15.5	13	950 [448.4]	8178494
		RCF3621STAM	35400 [10.4]	24500 [7.2]	10900 [3.2]	15.1	12.5	950 [448.4]	8178540
		RCF3617STAM	35400 [10.4]	24500 [7.2]	10900 [3.2]	15.1	12.5	950 [448.4]	8178540
		RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1275 [601.7]	8177934

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R96V 95% AFUE 2-stage Variable Speed Multipurpose Gas Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1636BJ1	R96VA0852521MSB	RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1275 [601.7]	8178465
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1150 [542.7]	8178495
		RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1150 [542.7]	8178541
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1275 [601.7]	8178580
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1150 [542.7]	8178616
RA1638BJ1	R96VA1002521MSA	RCF3621HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178466
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8178496
		RCF3621STAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.1	12.5	1200 [566.3]	8178542
		RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178581
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1225 [578.1]	8178617
RA1642AC1	R96VA1152524MSA	RCF3624HTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1250 [589.9]	8178582
		RCF3624MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1100 [519.1]	8178618
		RCF4821HTAM	41000 [12.0]	27000 [7.9]	14000 [4.1]	15.5	13	1125 [530.9]	8080526
		RCF4821STAM	40000 [11.7]	27700 [8.1]	12300 [3.6]	15.5	13	1125 [530.9]	7942240
		RCF4821MTAM	41000 [12.0]	27000 [7.9]	14000 [4.1]	15.5	13	1125 [530.9]	8080527
RA1642AC1	R96VA0602317MSA	RCF4821HTAM	40000 [11.7]	27700 [8.1]	12300 [3.6]	15.1	12.5	1125 [530.9]	7942241
		RCF4821MTAM	41000 [12.0]	27100 [7.9]	13900 [4.1]	15.5	13	1150 [542.7]	8080528
		RCF4821STAM	40000 [11.7]	27800 [8.1]	12200 [3.6]	15.5	13	1150 [542.7]	7942242
		RCF4824HTAM	41500 [12.2]	28300 [8.3]	13200 [3.9]	16	13	1275 [601.7]	8080529
		RCF4824MTAM	41000 [12.0]	29500 [8.6]	11500 [3.4]	15.5	13	1275 [601.7]	7942243
RA1642AC1	R96VA0852521MSB	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1300 [613.5]	7942283
		RCF4824MTAM	41000 [12.0]	29500 [8.6]	11500 [3.4]	15.5	13	1275 [601.7]	7942319
		RCF4821HTAM	41500 [12.2]	28200 [8.3]	13300 [3.9]	16	13	1250 [589.9]	8080530
		RCF4821MTAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	15.5	13	1250 [589.9]	7942244
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	7942284
RA1642AC1	R96VA1152524MSA	RCF4824MTAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	15.5	13	1250 [589.9]	7942320
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	7942285
		RCF4824STAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	7942321
		RCF4821HTAM	41000 [12.0]	27000 [7.9]	14000 [4.1]	15.5	13	1125 [530.9]	8080641
		RCF4821STAM	40000 [11.7]	27700 [8.1]	12300 [3.6]	15.5	13	1125 [530.9]	7942576
RA1642AJ1	R96VA0602317MSA	RCF4821HTAM	41000 [12.0]	27000 [7.9]	14000 [4.1]	15.5	13	1125 [530.9]	8080642
		RCF4821STAM	40000 [11.7]	27700 [8.1]	12300 [3.6]	15.1	12.5	1125 [530.9]	7942577
		RCF4824HTAM	41500 [12.2]	28300 [8.3]	13200 [3.9]	16	13	1150 [542.7]	8080643
		RCF4824MTAM	41000 [12.0]	29500 [8.6]	11500 [3.4]	15.5	13	1150 [542.7]	7942578
		RCF4821STAM	41000 [12.0]	29500 [8.6]	11500 [3.4]	15.5	13	1275 [601.7]	8080644
RA1642AJ1	R96VA0852521MSB	RCF4821HTAM	41000 [12.0]	29500 [8.6]	11500 [3.4]	15.5	13	1275 [601.7]	7942579
		RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1300 [613.5]	7942619
		RCF4824STAM	41000 [12.0]	29500 [8.6]	11500 [3.4]	15.5	13	1275 [601.7]	7942655
		RCF4821HTAM	41500 [12.2]	28200 [8.3]	13300 [3.9]	16	13	1250 [589.9]	8080645
		RCF4821STAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	15.5	13	1250 [589.9]	7942580
RA1642AJ1	R96VA1002521MSA	RCF4824HTAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	7942620
		RCF4824MTAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	15.5	13	1250 [589.9]	7942656
		RCF4824STAM	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1450 [684.3]	7942621
		RCF4821HTAM	41000 [12.0]	29300 [8.6]	11700 [3.4]	16	13	1250 [589.9]	7942657
		RCF4821MTAM	44500 [13.0]	31900 [9.3]	12600 [3.7]	16	13	1225 [578.1]	8080754
RA1648AC1	R96VA0852521MSB	RCF4821STAM	44000 [12.9]	30400 [8.9]	13600 [4.0]	15.5	13	1300 [613.5]	7942908
		RCF4824HTAM	45500 [13.3]	31800 [9.3]	13700 [4.0]	16	13	1350 [637.1]	7942946
		RCF4824STAM	44000 [12.9]	30400 [8.9]	13600 [4.0]	15.5	13	1300 [613.5]	7942981

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

R961: 96% AFUE 2-stage Variable Speed Multipoint Gas Furnace Ratings									
Outdoor Unit	Furnace	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1648AC1	R96VA1002521MSA	RCF4821MTAM	44500 [13.0]	32100 [9.4]	12400 [3.6]	16	13	1250 [589.9]	8080755
		RCF4821STAM	44000 [12.9]	30700 [9.0]	13300 [3.9]	15.5	13	1350 [637.1]	7942909
		RCF4824HTAM	46000 [13.5]	33100 [9.7]	12900 [3.8]	16	13	1475 [696.1]	7942947
		RCF4824STAM	44000 [12.9]	30700 [9.0]	13300 [3.9]	15.5	13	1350 [637.1]	7942982
RA1648AC1	R96VA1152524MSA	RCF4824HTAM	47000 [13.8]	34700 [10.2]	12300 [3.6]	16	13	1575 [743.3]	7942948
		RCF4824STAM	44500 [13.0]	31200 [9.1]	13300 [3.9]	16	13	1350 [637.1]	7942983
		RCF4821MTAM	44500 [13.0]	31900 [9.3]	12600 [3.7]	16	13	1225 [578.1]	8080861
		RCF4821STAM	44000 [12.9]	30400 [8.9]	13600 [4.0]	15.5	13	1300 [613.5]	7943234
RA1648AJ1	R96VA0862521MSB	RCF4824HTAM	45500 [13.3]	31800 [9.3]	13700 [4.0]	16	13	1350 [637.1]	7943272
		RCF4824STAM	44000 [12.9]	30400 [8.9]	13600 [4.0]	15.5	13	1300 [613.5]	7943307
		RCF4821MTAM	44500 [13.0]	32100 [9.4]	12400 [3.6]	16	13	1250 [589.9]	8080862
		RCF4821STAM	44000 [12.9]	30700 [9.0]	13300 [3.9]	15.5	13	1350 [637.1]	7943235
RA1648AJ1	R96VA1002521MSA	RCF4824HTAM	46000 [13.5]	33100 [9.7]	12900 [3.8]	16	13	1475 [696.1]	7943273
		RCF4824STAM	44000 [12.9]	30700 [9.0]	13300 [3.9]	15.5	13	1350 [637.1]	7943308
		RCF4824HTAM	47000 [13.8]	34700 [10.2]	12300 [3.6]	16	13	1575 [743.3]	7943274
		RCF4824STAM	44500 [13.0]	31200 [9.1]	13300 [3.9]	16	13	1350 [637.1]	7943309
RA1660AC1	R96VA0862521MSB	RCF6021STAM	55000 [16.1]	37000 [10.8]	18000 [5.3]	14.5	12	1575 [743.3]	8080965
		RCF6024HTAM	57000 [16.7]	40000 [11.7]	17000 [5.0]	15.1	12.5	1575 [743.3]	7943781
		RCF6024STAM	57000 [16.7]	40000 [11.7]	17000 [5.0]	15.1	12.5	1575 [743.3]	7943810
		RCF6021STAM	54500 [16.0]	35300 [10.3]	19200 [5.6]	15.1	12.5	1400 [660.7]	8080966
RA1660AC1	R96VA1002521MSA	RCF6024HTAM	57000 [16.7]	39600 [11.6]	17400 [5.1]	15.1	12.5	1550 [731.5]	7943782
		RCF6024STAM	57000 [16.7]	39600 [11.6]	17400 [5.1]	15.1	12.5	1550 [731.5]	7943811
		RCF6024HTAM	57500 [16.9]	40500 [11.9]	17000 [5.0]	15.5	13	1575 [743.3]	7943783
		RCF6021STAM	57000 [16.9]	40500 [11.9]	17000 [5.0]	15.5	13	1575 [743.3]	7943812
RA1660AJ1	R96VA0862521MSB	RCF6021STAM	55000 [16.1]	37000 [10.8]	18000 [5.3]	14.5	12	1575 [743.3]	8081043
		RCF6024HTAM	57000 [16.7]	40000 [11.7]	17000 [5.0]	15.1	12.5	1575 [743.3]	7943550
		RCF6024STAM	57000 [16.7]	40000 [11.7]	17000 [5.0]	15.1	12.5	1575 [743.3]	7943589
		RCF6021STAM	54500 [16.0]	35300 [10.3]	19200 [5.6]	15.1	12.5	1400 [660.7]	8081044
RA1660AJ1	R96VA1002521MSA	RCF6024HTAM	57000 [16.7]	39600 [11.6]	17400 [5.1]	15.1	12.5	1550 [731.5]	7943561
		RCF6024STAM	57000 [16.7]	39600 [11.6]	17400 [5.1]	15.1	12.5	1550 [731.5]	7943590
		RCF6024HTAM	57500 [16.9]	40500 [11.9]	17000 [5.0]	15.5	13	1575 [743.3]	7943562
		RCF6024STAM	57500 [16.9]	40500 [11.9]	17000 [5.0]	15.5	13	1575 [743.3]	7943591

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

Air Handler Ratings							
Outdoor Unit	Air Handler	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	AHR#
RA1618AJ1	RF1P1821SPAN	18000 [5.3]	12600 [3.7]	5400 [1.6]	14.5	12.2	7940562
	RF1T2421MTAN	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	7940563
	RBHP-17	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	7940293
	RH1P1817STAN	18000 [5.3]	13500 [4.0]	4500 [1.3]	15	12.5	7940564
	RH1T2417STAN	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	7940565
	RH1V2417STAN	18000 [5.3]	13500 [4.0]	4500 [1.3]	16	13	7940566
	RF1P2421SPAN	24000 [7.0]	17500 [5.1]	6500 [1.9]	14	12.2	8079398
RA1624AJ1	RF1T2421MTAN	24000 [7.0]	17500 [5.1]	6500 [1.9]	15.5	13	7940889
	RBHP-17	24000 [7.0]	17500 [5.1]	6500 [1.9]	15	12.5	7940572
	RH1P2417STAN	24000 [7.0]	17500 [5.1]	6500 [1.9]	14.5	12.2	7940890
	RH1T2417STAN	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	7940891
	RH2T2421MTAN	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	7940893
	RH1V2417STAN	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	7940892
	RH2V2421HTAC	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	7940894
RA1630AJ1	RF1P3024SPAN	28600 [8.4]	20000 [5.9]	8600 [2.5]	14	12.2	8080142
	RF1T3624MTAN	29800 [8.7]	21700 [6.4]	8100 [2.4]	16	13	7941341
	RBHP-21	28800 [8.4]	19700 [5.8]	9100 [2.7]	16	13	7940903
	RH1P3017STAN	28400 [8.3]	21400 [6.3]	7000 [2.1]	15	12.5	7941342
	RH1T3617STAN	29000 [8.5]	22100 [6.5]	6900 [2.0]	16	13	7941343
	RH1T3621HTAN	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	8080143
	RH1T3621MTAN	30000 [8.8]	21100 [6.2]	8900 [2.6]	16	13	7941344
	RH1V3617STAN	29000 [8.5]	22200 [6.5]	6800 [2.0]	16	13	7941345
	RH1V3621HTAN	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	8080144
	RH1V3621MTAN	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	7941346
	RF1P3624SPAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	14.5	12.2	8178398
	RF1P3624STAN		25600 [7.5]	10400 [3.0]			0
	RF1T3624MTAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	8178399
	RBHP-21	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	8177893
RA1636BC1	RH1P3017STAN	35000 [10.3]	24100 [7.1]	10900 [3.2]	14.5	12.2	8178400
	RH1P3617STAN	35600 [10.4]	25300 [7.4]	10300 [3.0]	14	12.2	8178401
	RH1P3621STAN	35600 [10.4]	25300 [7.4]	10300 [3.0]	14	12.2	8178402
	RH1T3621STAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	8178403
	RH1T3621HTAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	8178404
	RH1T3621MTAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	8178405
	RH1V3617STAN	36000 [10.6]	25400 [7.4]	10600 [3.1]	15.5	13	8178406
	RH1V3621HTAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	8178407
	RH1V3621MTAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	8178408
	RH2V3624HTAC	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	8178409

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

Air Handler Ratings		Air Handler	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1636BJ1	Outdoor Unit	RF1P3624SPAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	14.5	12.2	1100 [519.1]	8178921
		RF1T3624MTAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1025 [483.7]	8178922
		RBHP-21	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1000 [471.9]	8178924
		RH1P3617STAN	35000 [10.3]	24100 [7.1]	10900 [3.2]	14.5	12.2	950 [448.4]	8178923
		RH1P3617STAN	35600 [10.4]	25300 [7.4]	10300 [3.0]	14	12.2	1100 [519.1]	8178924
		RH1P3621STAN	35600 [10.4]	25300 [7.4]	10300 [3.0]	14	12.2	1100 [519.1]	8178925
		RH1T3617STAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1200 [566.3]	8178926
		RH1T3621MTAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1200 [566.3]	8178927
RA1642AC1		RH1T3621MTAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1150 [542.7]	8178928
		RH1V3617STAN	36000 [10.6]	25400 [7.4]	10600 [3.1]	15.5	13	1025 [483.7]	8178929
		RH1V3621MTAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1200 [566.3]	8178930
		RH1V3621MTAN	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1200 [566.3]	8178931
		RH2V3624HTAC	36000 [10.6]	25600 [7.5]	10400 [3.0]	16	13	1200 [566.3]	8178932
		RBHP-24	41000 [12.0]	26900 [7.9]	14100 [4.1]	16	13	1400 [660.7]	7942223
		RH1P4221STAN	40500 [11.9]	29300 [8.6]	11200 [3.3]	14.5	12.2	1325 [625.3]	7942552
		RH1T4821MTAN	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	8080627
RA1642AJ1		RH1T4821STAN	41500 [12.2]	30700 [9.0]	10800 [3.2]	16	13	1400 [660.7]	7942553
		RH1V4821MTAN	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8080628
		RH1V4821STAN	41500 [12.2]	30700 [9.0]	10800 [3.2]	15.5	13	1400 [660.7]	7942554
		RBHP-24	41000 [12.0]	26500 [7.9]	14100 [4.1]	16	13	1400 [660.7]	7942559
		RH1P4221STAN	40500 [11.9]	29300 [8.6]	11200 [3.3]	14.5	12.2	1325 [625.3]	7942887
		RH1T4821MTAN	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1400 [660.7]	8080742
		RH1T4821STAN	41500 [12.2]	30700 [9.0]	10800 [3.2]	16	13	1400 [660.7]	7942888
		RH1V4821MTAN	42000 [12.3]	31100 [9.1]	10900 [3.2]	16	13	1425 [672.5]	8080743
RA1648AC1		RH1V4821STAN	41500 [12.2]	30700 [9.0]	10800 [3.2]	15.5	13	1400 [660.7]	7942889
		RBHP-24	44000 [12.9]	28900 [8.5]	15100 [4.4]	16	13	1400 [660.7]	7942894
		RH1P4821STAN	44500 [13.0]	32100 [9.4]	12400 [3.6]	14.5	12	1500 [707.9]	7943208
		RH1T4821MTAN	46500 [13.6]	36200 [10.6]	10300 [3.0]	16	13	1600 [755.1]	8080849
		RH1T4821STAN	45000 [13.2]	32000 [9.4]	13000 [3.8]	16	13	1400 [660.7]	7943209
		RH1T4824STAN	45500 [13.3]	33500 [9.8]	12000 [3.5]	16	13	1550 [731.5]	7943210
		RH2T4824MTAN	46500 [13.6]	33100 [9.7]	13400 [3.9]	16	13	1400 [660.7]	7943212
		RH1V4821MTAN	45500 [13.3]	34200 [10.0]	11300 [3.3]	16	13	1425 [672.5]	8080850
RA1648AJ1		RH1V4821STAN	44500 [13.0]	31500 [9.2]	13000 [3.8]	16	13	1400 [660.7]	7943211
		RH2V4824HTAC	47000 [13.8]	34900 [10.2]	12100 [3.5]	16	13	1600 [755.1]	7943213
		RBHP-24	44000 [12.9]	28900 [8.5]	15100 [4.4]	16	13	1400 [660.7]	7943220
		RH1P4821STAN	44500 [13.0]	32100 [9.4]	12400 [3.6]	14.5	12	1500 [707.9]	7943534
		RH1T4821MTAN	46500 [13.6]	36200 [10.6]	10300 [3.0]	16	13	1600 [755.1]	8080956
		RH1T4821STAN	45000 [13.2]	32000 [9.4]	13000 [3.8]	16	13	1400 [660.7]	7943535
		RH1T4824STAN	45500 [13.3]	33500 [9.8]	12000 [3.5]	16	13	1550 [731.5]	7943536
		RH2T4824MTAN	46500 [13.6]	33100 [9.7]	13400 [3.9]	16	13	1400 [660.7]	7943538
RA1648AJ1		RH1V4821MTAN	45500 [13.3]	34200 [10.0]	11300 [3.3]	16	13	1425 [672.5]	8080957
		RH1V4821STAN	44500 [13.0]	31500 [9.2]	13000 [3.8]	16	13	1400 [660.7]	7943537
		RH2V4824HTAC	47000 [13.8]	34900 [10.2]	12100 [3.5]	16	13	1600 [755.1]	7943539
		RH2V4824MTAN	46500 [13.6]	33100 [9.7]	13400 [3.9]	16	13	1400 [660.7]	7943539

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions – Cooling (con't.)

Air Handler Ratings									
Outdoor Unit	Air Handler	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHR#	
RA1660AC1	RBHP-25	56000 [16.4]	39100 [11.5]	16900 [5.0]	15	12.5	1800 [849.5]	7943767	
	RH1P6024STAN	57500 [16.9]	41900 [12.3]	15600 [4.6]	14	11.7	1750 [825.9]	7943984	
	RH1T6021STAN	56000 [16.4]	37900 [11.1]	18100 [5.3]	15	12.5	1575 [743.3]	8081034	
	RH1T6024STAN	58000 [17.0]	41200 [12.1]	16800 [4.9]	16	13	1600 [755.1]	7943935	
	RH2T6024STAN	57500 [16.9]	40700 [11.9]	16800 [4.9]	15.5	13	1600 [755.1]	7943937	
	RH1V6021STAN	56000 [16.4]	38000 [11.1]	18000 [5.3]	15	12.5	1600 [755.1]	8081035	
	RH1V6024STAN	58000 [17.0]	41200 [12.1]	16800 [4.9]	16	13	1600 [755.1]	7943936	
	RH2V6024HTAC	58500 [17.1]	42700 [12.5]	15800 [4.6]	15.5	13	1725 [814.1]	7943938	
RA1660AJ1	RBHP-25	56000 [16.4]	39100 [11.5]	16900 [5.0]	15	12.5	1800 [849.5]	7943546	
	RH1P6024STAN	57500 [16.9]	41900 [12.3]	15600 [4.6]	14	11.7	1750 [825.9]	7943713	
	RH1T6021STAN	56000 [16.4]	37900 [11.1]	18100 [5.3]	15	12.5	1575 [743.3]	8081112	
	RH1T6024STAN	58000 [17.0]	41200 [12.1]	16800 [4.9]	16	13	1600 [755.1]	7943714	
	RH2T6024STAN	57500 [16.9]	40700 [11.9]	16800 [4.9]	15.5	13	1600 [755.1]	7943716	
	RH1V6021STAN	56000 [16.4]	38000 [11.1]	18000 [5.3]	15	12.5	1600 [755.1]	8081113	
	RH1V6024STAN	58000 [17.0]	41200 [12.1]	16800 [4.9]	16	13	1600 [755.1]	7943715	
	RH2V6024HTAC	58500 [17.1]	42700 [12.5]	15800 [4.6]	15.5	13	1725 [814.1]	7943717	

[] Designates Metric Conversions

Performance Data @ AHRI Standard Conditions -- Cooling (con't.)

RHWB Hydronic Air Handler Ratings									
Outdoor Unit	Hydronic Air Handler	Indoor Coil	Total Capacity BTU/H [kW]	Net Sensible BTU/H [kW]	Net Latent BTU/H [kW]	SEER	EER	Indoor CFM [L/s]	AHRI#
RA1624AJ1	RHWB-04WMX36B	RCF2417HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940593
		RCF2417MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940617
		RCF2417STAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940642
		RCF2421MTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940707
		RCF2421HTAM	24000 [7.0]	17500 [5.1]	6500 [1.9]	16	13	875 [413.0]	7940674
RA1630AJ1	RHWB-04WMX36B	RCF3617STAM	28400 [8.3]	21100 [6.2]	7300 [2.1]	16	13	875 [413.0]	7940924
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1075 [507.3]	7940966
		RCF3621STAM	28600 [8.4]	21400 [6.3]	7200 [2.1]	16	13	900 [424.8]	7941010
		RCF3617STAM	28800 [8.4]	21800 [6.4]	7000 [2.1]	16	13	975 [460.1]	7940925
		RCF3621MTAM	30000 [8.8]	22800 [6.7]	7200 [2.1]	16	13	1000 [471.9]	7940967
RA1636BC1	RHWB-04WMX36B	RCF3621STAM	29000 [8.5]	22100 [6.5]	6900 [2.0]	16	13	1000 [471.9]	7941011
		RCF3617STAM	36800 [10.5]	25200 [7.4]	10600 [3.1]	15.1	12.5	1025 [483.7]	8177914
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1075 [507.3]	8177984
		RCF3621STAM	36000 [10.6]	25500 [7.5]	10500 [3.1]	15.1	12.5	1050 [495.5]	8178031
		RCF3617STAM	35600 [10.4]	24800 [7.3]	10800 [3.2]	15.1	12.5	975 [460.1]	8177915
RA1636BC1	RHWB-06WMX48B	RCF3621MTAM	36000 [10.6]	24800 [7.3]	11200 [3.3]	15.5	13	1000 [471.9]	8177985
		RCF3621STAM	35600 [10.4]	24800 [7.3]	10800 [3.2]	15.1	12.5	975 [460.1]	8178032
		RCF3617STAM	35800 [10.5]	25200 [7.4]	10600 [3.1]	15.1	12.5	1025 [483.7]	8178445
		RCF3621MTAM	36000 [10.6]	25600 [7.5]	10400 [3.0]	15.5	13	1075 [507.3]	8178513
		RCF3621STAM	36000 [10.6]	25500 [7.5]	10500 [3.1]	15.1	12.5	1050 [495.5]	8178559
RA1636BJ1	RHWB-06WMX48B	RCF3617STAM	35600 [10.4]	24800 [7.3]	10800 [3.2]	15.1	12.5	975 [460.1]	8178446
		RCF3621MTAM	36000 [10.6]	24800 [7.3]	11200 [3.3]	15.5	13	1000 [471.9]	8178514
		RCF3621STAM	35600 [10.4]	24800 [7.3]	10800 [3.2]	15.1	12.5	975 [460.1]	8178560
		RCF4821STAM	40500 [11.9]	28600 [8.4]	11900 [3.5]	15.5	13	1200 [566.3]	7942261
		RCF4821STAM	40500 [11.9]	28800 [8.4]	11700 [3.4]	15.1	12.5	1250 [589.9]	7942282
RA1642AC1	RHWB-08WFX60B	RCF4824STAM	41500 [12.2]	30400 [8.9]	11100 [3.3]	16	13	1350 [637.1]	7942384
		RCF4824STAM	41500 [12.2]	30700 [9.0]	10800 [3.2]	16	13	1400 [660.7]	7942385
		RCF4821STAM	40500 [11.9]	28600 [8.4]	11900 [3.5]	15.5	13	1200 [566.3]	7942597
		RCF4821STAM	40500 [11.9]	28800 [8.4]	11700 [3.4]	15.1	12.5	1250 [589.9]	7942598
		RCF4824STAM	41500 [12.2]	30400 [8.9]	11100 [3.3]	16	13	1350 [637.1]	7942670
RA1642AJ1	RHWB-10WFX60B	RCF4824STAM	41500 [12.2]	30700 [9.0]	10800 [3.2]	16	13	1400 [660.7]	7942671
		RCF4821STAM	43500 [12.7]	29300 [8.6]	14200 [4.2]	15.5	13	1200 [566.3]	7942924
		RCF4821STAM	43500 [12.7]	29300 [8.6]	14200 [4.2]	15.5	13	1200 [566.3]	7942925
		RCF4824STAM	44500 [13.0]	31700 [9.1]	13400 [3.9]	16	13	1325 [625.3]	7942996
		RCF4824STAM	45000 [13.2]	32600 [9.6]	12400 [3.6]	16	13	1500 [707.9]	7942997
RA1648AJ1	RHWB-06WMX36B	RCF4821STAM	43500 [12.7]	29300 [8.6]	14200 [4.2]	15.5	13	1200 [566.3]	7943250
		RCF4821STAM	43500 [12.7]	29300 [8.6]	14200 [4.2]	15.5	13	1200 [566.3]	7943251
		RCF4824STAM	44500 [13.0]	31100 [9.1]	13400 [3.9]	16	13	1325 [625.3]	7943322
		RCF4824STAM	45000 [13.2]	32600 [9.6]	12400 [3.6]	16	13	1500 [707.9]	7943323
		RCF6024STAM	57000 [16.7]	39400 [11.5]	17600 [5.2]	15.5	13	1500 [707.9]	7943822
RA1660AC1	RHWB-08WFX60B	RCF6024STAM	58000 [17.0]	42200 [12.4]	15800 [4.6]	15.5	13	1725 [814.1]	7943823
		RCF6024STAM	57000 [16.7]	39400 [11.5]	17600 [5.2]	15.5	13	1500 [707.9]	7943601
		RCF6024STAM	57000 [16.7]	39400 [11.5]	17600 [5.2]	15.5	13	1500 [707.9]	7943601
		RCF6024STAM	58000 [17.0]	42200 [12.4]	15800 [4.6]	15.5	13	1725 [814.1]	7943602
		RCF6024STAM	58000 [17.0]	42200 [12.4]	15800 [4.6]	15.5	13	1725 [814.1]	7943602

[] Designates Metric Conversions

GUIDE SPECIFICATIONS

General

System Description

Outdoor-mounted, air-cooled, split-system air conditioner composite base pan unit suitable for ground or rooftop installation. Unit consists of a hermetic compressor, an air-cooled coil, propeller-type condenser fan, suction and legend line service valve, and a control box. Unit will discharge supply air upward as shown on contract drawings. Unit will be used in a refrigeration circuit to match up to a coil unit.

Quality Assurance

- Unit will be rated in accordance with the latest edition of AHRI Standard 210.
- Unit will be certified for capacity and efficiency, and listed in the latest AHRI directory.
- Unit construction will comply with latest edition of ANSI/ASHRAE and with NEC.
- Unit will be constructed in accordance with UL standards and will carry the UL label of approval. Unit will have c-UL-us approval.
- Unit cabinet will be capable of withstanding ASTM B117 1000-hr salt spray test.
- Air-cooled condenser coils will be leak tested at 150 psig and pressure tested at 550 psig.
- Unit constructed in ISO9001 approved facility.

Delivery, Storage, and Handling

- Unit will be shipped as single package only and is stored and handled per unit manufacturer's recommendations.

Warranty (for inclusion by specifying engineer) — U.S. and Canada only.

Products

Equipment

Factory assembled, single piece, air-cooled air conditioner unit. Contained within the unit enclosure is all factory wiring, piping, controls, compressor, refrigerant charge R-410A, and special features required prior to field start-up.

Unit Cabinet

- Unit cabinet will be constructed of galvanized steel, bonderized, and coated with a powder coat paint.
- All units constructed with louver coil protection and corner post. Louver can be removed by removing one fastener per louver panel.

AIR-COOLED, SPLIT-SYSTEM AIR CONDITIONER

RA16 1-1/2 TO 5 NOMINAL TONS

Fans

- Condenser fan will be direct-drive propeller type, discharging air upward.
- Condenser fan motors will be totally enclosed, 1-phase type with class B insulation and permanently lubricated bearings. Shafts will be corrosion resistant.
- Fan blades will be statically and dynamically balanced.
- Condenser fan openings will be equipped with coated steel wire safety guards.

Compressor

- Compressor will be hermetically sealed.
- Compressor will be mounted on rubber vibration isolators.

Condenser Coil

- Condenser coil will be air cooled.
- Coil will be constructed of aluminum fins mechanically bonded to copper tubes.

Refrigeration Components

- Refrigeration circuit components will include liquid-line shutoff valve with sweat connections, vapor-line shutoff valve with sweat connections, system charge of R-410A refrigerant, and compressor oil.
- Unit will be equipped with filter drier for R-410A refrigerant for field installation.

Operating Characteristics

- The capacity of the unit will meet or exceed _____ Btuh at a suction temperature of _____ °F/°C. The power consumption at full load will not exceed _____ kW.
- Combination of the unit and the evaporator or fan coil unit will have a total net cooling capacity of _____ Btuh or greater at conditions of _____ CFM entering air temperature at the evaporator at _____ °F/°C wet bulb and _____ °F/°C dry bulb, and air entering the unit at _____ °F/°C.
- The system will have a SEER of _____ Btuh/watt or greater at DOE conditions.

Electrical Requirements

- Nominal unit electrical characteristics will be _____ v, single phase, 60 Hz. The unit will be capable of satisfactory operation within voltage limits of _____ v to _____ v.
- Nominal unit electrical characteristics will be _____ v, three phase, 60 Hz. The unit will be capable of satisfactory operation within voltage limits of _____ v to _____ v.
- Unit electrical power will be single point connection.
- Control circuit will be 24v.

Special Features

- Refer to section of this literature identifying accessories and descriptions for specific features and available enhancements.

GENERAL TERMS OF LIMITED WARRANTY*

Ruud will furnish a replacement for any part of this product which fails in normal use and service within the applicable period stated, in accordance with the terms of the limited warranty.

*For complete details of the Limited and Conditional Warranties, including applicable terms and conditions, contact your local contractor or the Manufacturer for a copy of the product warranty certificate.

Conditional Parts
(Registration Required) Ten (10) Years



In keeping with its policy of continuous progress and product improvement, Ruud reserves the right to make changes without notice.

Ruud Heating, Cooling & Water Heating • P.O. Box 17010
Fort Smith, Arkansas 72917 • www.ruud.com

Ruud Canada • 125 Edgeware Road, Unit 1
Brampton, Ontario • L6Y 0P5

RELY ON RUUD.™

PRINTED IN U.S.A. 5/15 QG FORM NO. 422-222 REV. 4

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

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

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

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

☐ Check if contractor.

Agent Name _____

Address _____

Telephone (_____) _____

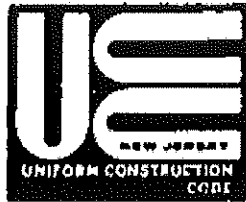
Signature _____ Date _____

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	
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protect.									
☐ Utility Dig No.									
☐ Other									
☐									
☐									

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 EXPIRED	
☐ Temporary Certificate of Occupancy	No. _____	_____	_____
☐ Temporary Certificate of Occupancy	No. _____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____
☐ Certificate of Approval	No. _____	_____	_____
☐ None			



CONSTRUCTION PERMIT

Date Issued 7-16-90
Control #
Permit # 1396-90

NOTIFICATION Block 524 Lot 4

Work Site Location 449 Central Ave Contractor Same
Address _____

Owner in Fee Richard Engler
Address Same
Tele. (____) _____

Lic. No. or Bldrs. Reg. No. _____ Exp. Date _____
Federal Emp. No. _____
or Social Security No. _____

Whereby granted permission to perform the following work:

☒ BUILDING ☐ PLUMBING ☐ OTHER _____
☐ ELECTRICAL ☐ FIRE PROTECTION

DESCRIPTION OF WORK:

re-roof

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 \$ 920.-

2. Form F-170A

CONSTRUCTION OFFICIAL [Signature]

1 WHITE - OFFICE 2 CANARY - TAX ASSESSOR 3 PINK - JACKET 4 GOLD - APPLICANT

PAYMENTS (Office Use Only)	
Building	524 #
Plumbing	LOT
Electrical	BUILDING
Fire Protection	C / O
Other	
Other	BUILDING
DCA Training Fee	BUILDING
Cert. of Occ.	TOTAL
Other	CASH
Total	CHANGE
Check <u>07/16/90</u> NO. <u>5</u> 0032A005	
Cash _____	
Collected By: _____	



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued 7-16-90
Control #
Permit # 1396-90

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

Block 524 Lot 4
Work Site Location 449 CENTRAL AVE

Owner in Fee RICHARD & VALERIE ENGLERT
Address 449 CENTRAL AVE
BRICK

Tele. ()
Contractor NONE
Address

Tele. ()
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. or Social Security No.

C. CERTIFICATION IN LIEU OF OATH

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

Valerie Englert
Signature

**D. TECHNICAL SITE DATA
DESCRIPTION OF WORK**

JOB SUMMARY (Office Use Only)

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

TYPE OF WORK:

- [] New Building
[] Addition
[] Alteration
☒ Roofing
[] Siding
[] Other
[] Demolition
[] Miscellaneous
[] Fence _____ Height
[] Sign _____ Sq. Ft.
[] Pool
[] Elevator
[] Asbestos Abatement
[] Other _____

(Office Use Only)

FEE

\$ _____

B. BUILDING CHARACTERISTICS

Use Group Present R-3 Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories _____

Height of Structure _____ Ft.
Area—Largest Floor _____ Sq. Ft.
Total Bldg. Area/All Floors _____ Sq. Ft.
Volume of Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1+2) \$ _____

Administrative Surcharge

Paid [] Check # _____ Minimum Fee \$ _____
Collected by: _____ TOTAL FEE \$ _____



CONSTRUCTION PERMIT APPLICATION

C-18-000089

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

I. IDENTIFICATION

1. Proposed Work Site at: 450 Central Ave

2. Name of Owner in Fee: Francine Gashan

Tel. (732) 477-7544 e-mail _____

Address _____ street _____ municipality _____ zip code _____

3. Ownership in Fee: Public _____ Private _____

4. Principal Contractor: _____ Tel. (____) _____

Address _____ e-mail _____

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Home Imprr NJR Plumbing Services

Federal Em 1415 Wyckoff Rd, Wall, NJ 07719

License No. 9692 Exp. Date 6/2017

5. Architect or Federal Employee No. 22-3609806

Address _____

Tel. (____) _____

6. Responsible Edward B. Gashan

Tel. 732-919-8172

Tel. (____) _____

Fax. 732-938-3010

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	\$	
9. State Permit Surcharge Fee	\$	
10. Subtotal	\$	
11. 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. 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 _____

(office use only)

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)

- ☐ Building
- ☐ Electrical
- ☐ Plumbing
- ☐ Fire Protection
- ☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	Re-viewer

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/Standpipes
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks
12. ☐ Fire Alarm



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 2/15/2018
Control Number C-18-000089
Permit Number 18-0127
Permit Issue Date 1/18/2018
Certificate Number 18-0127

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 450 CENTRAL AVE Brick Township, NJ Block: 527 Lot: 30 Qual: _____
Owner in Fee: GARDNER, FRANCINE
Owner Address: 450 CENTRAL AVE BRICK NJ 08723
Telephone: (732) 477-7504
Contractor NJR PLUMBING SERVICES
Address 1415 WYCKOFF RD WALL NJ 07719
Telephone: (732) 919-8172 Fax: (732) 938-3010
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: REPLACEMENT 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 S: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: 2/15/2018

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

Fee: \$0.00

Check Number: _____

Collected By: _____



MECHANICAL INSPECTOR TECHNICAL SECTION



Date Received
Control #

1/18/18

Date Issued
Permit #

18-0127

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

Block 527 Lot 30 Qualification Code _____
Work Site Location 450 Central Av
Brick
Owner in Fee: Francine Gardner
Tel. (732) 477-7504 e-mail _____
Address _____
street municipality zip code
Contractor: NJR PLUMBING SERVICES Tel. (732) 938-1155
Address 1415 WYCKOFF RD e-mail _____
WALL, NJ 07719

Contractor License No. or Builder Registration No. _____ Exp. Date 6/19
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. _____ FAX: (732) 938-3010

B. MECHANICAL CHARACTERISTICS

Use Group: ☒ Present: R-3, R-4 or R-5 (circle one) Proposed: R-3, R-4 or R-5 (circle one)
Heating System work: [] New OR [] Modification to Existing OR [] Conversion OR [] Replacement
Type: [] Hydronic [] Hot Air
Fuel Type: ☒ Gas [] Oil [] Electric [] Solar [] Other _____

Estimated Cost of Mechanical Work \$ 1670.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		DATES		
[] No Plans Required		Type:	Failure	Failure	Approval	Initial
[] Mechanical Plans Approved		Gas Piping				
Date: _____ Approved by: _____		Appliance				
Joint Plan Review Required:		Chimney/Vent				
[] Bldg. [] Elec. [] Plumb. [] Fire.		Oil Piping				
[] Elev.		Oil Tank				
SUBCODE APPROVAL for PERMIT		LPG Tank				
Date: _____		Hydronic Piping				
Approved by: _____		Fireplace				
SUBCODE APPROVAL for CERTIFICATE		Chimney Cert.				
[] CA [] CCO		Other	<u>DNAR</u>	<u>1-28-18</u>	<u>2-9-18</u>	<u>WT</u>
Date: <u>2-12-18</u>						
Approved by: _____						

C. CERTIFICATION IN LIEU OF OATH

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

Sign here: _____

Print name here: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

DIRECT REPLACEMENT OF GAS WATER HEATER

NO.	FIXTURE/EQUIPMENT
1	Water Heater
	Fuel Oil Piping Connections
	Gas Piping Connections
	Steam Boiler
	Hot Water Boiler
	Hot Air Furnace
	Oil Tank
	LPG Tank
	Fireplace
	Other

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

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(f)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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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 **NJR Plumbing Services**

Address **1415 Wyckoff Rd, Wall, NJ 07719**

License No. **9892** Exp. Date **6/2017**

Federal Employee No. **22-3609806**

Telep

Edward B. Glashan

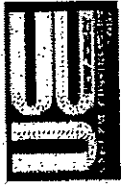
Signa Tel **732-919-8172**

Fax **732-938-3010**

ner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ☐ **HOME ELEVATION:** Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

Relief 2nd Indirect



CONSTRUCTION PERMIT

Date Issued 1/18/18
Control # C-18-000089
Permit # 18-0127

IDENTIFICATION Block: 527 Lot: 30 Qualifier NJR PLUMBING SERVICES
Work Site Location: 450 CENTRAL AVE Brick Township, NJ Contractor Address 1415 WYCKOFF RD WALL NJ 07719
Owner in Fee GARDNER, FRANCES Telephone: (908) 241-172
450 CENTRAL AVE BRICK NJ 08723 Lic. No. or Bldrs. Reg. No. [REDACTED]
Federal Employee No. [REDACTED]

Telephone: [REDACTED]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

REPLACEMENT 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 \$1,670

Construction Official [Signature]

Date 1/18/18

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

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☒ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and/or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials; sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements.

☒ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment, electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☐ A complete copy of released plans must be kept on the job site. If you do not understand any of this information, please ask.

PAYMENTS (Office Use Only)	
Building	\$0
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$125.00
DCA Training Fee	\$3
CO Fee	\$0
Other	\$0
Total	\$128
Check No. <u>44929</u>	<u>44920</u>
Cash <u>01/18/18</u>	<u>0015588500</u>
Credit <u>01/18/18</u>	<u>0003 SERU</u>
Collected By <u>[Signature]</u>	<u>[Signature]</u>

RECEIVED
\$128.00
\$13.00
\$13.00
\$125.00
\$13.00



CHIMNEY VERIFICATION FOR REPLACEMENT OF FUEL-FIRED EQUIPMENT

BLOCK S27 LOT 30 QUALIFICATION CODE _____ PERMIT # _____

WORK SITE ADDRESS 450 Central Ave

Owner in Fee Francine Gardner

Verifying Individual Edward Glashan Company NJR Plumbing Services

Address 1415 Wyckoff Rd Wall NJ 07719

Tel: [REDACTED] State NJ Zip Code 07719

City Wall Fax: (732) 938-3010

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: Size 6"
- ☒ "B" Label Vent
 - ☐ "L" Label Vent
 - ☐ Flexible Liner
 - ☐ Power Vent/Exhauster
 - ☐ Other _____

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

Fuel Type

- Appliance 1: Gas Oil / Gas / Other: Gas
- Appliance 2: Gas Oil / Gas / Other: Gas
- Appliance 3: _____ Oil / Gas / Other: _____

BTU Rating (input/hour)

400

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 [Signature] Date 1/5/18

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.

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.

NOT AN
ELECTRICIAN'S
OR PLUMBER'S
LICENSE

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER, WITH A MULTICOLORED
BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.



State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

HAS REGISTERED

NJR HOME SERVICES COMPANY
Frank Casey, Manager--NJRH'S Operations
1415 Wyckoff Road
Wall NJ 07719

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

02/03/2017 TO 03/31/2018
VALID

Frank Casey
Signature of Licensee/Registrant/Certificate Holder


LICENSEE/REGISTRANT/CERTIFICATION #

Steve L. L...
DIRECTOR

FENCE CHECK LIST

- | | | | |
|----|--|-------------------------|--------------|
| 1. | Construction jacket signed and completed | Yes <u>~~X~~</u> | No <u> </u> |
| 2. | Zoning application signed and completed | Yes <u>~~X~~</u> | No <u> </u> |
| 3. | Two TRUE SIZE surveys indicating with X's the location of the fence, height & type | Yes <u>~~X~~</u> | No <u> </u> |
| 4. | Building sub-code information if fence is enclosing a pool (fence must meet code) | Yes <u> </u> | No <u> </u> |
| 5. | Engineering form completed | Yes <u>~~X~~</u> | No <u> </u> |

FOR ALL PERMITS AFFECTING A RESIDENTIAL STRUCTURE
(REGARDLESS IF A FIRE PERMIT IS REQUIRED) A MINIMUM OF 1 (ONE)
BATTERY OPERATED OR ELECTRIC SMOKE DETECTOR IS REQUIRED
ON EACH LEVEL AND IN THE VICINITY OF THE SLEEPING ROOMS. AS
OF APRIL 7, 2003 THE STATE OF NJ REQUIRES THE INSTALLATION OF
AT LEAST 1 (ONE) CARBON MONOXIDE DETECTOR IN THE VICINITY OF
ALL SLEEPING ROOMS. THIS APPLIES TO ALL DWELLING UNITS
CONTAINING A FUEL BURNING APPLIANCE OR ATTACHED GARAGE.

For work not requiring a fire inspection for fire alarms in accordance with the code,
homeowners or their agents (contractors) shall be required to confirm the
installation of these devices. This may be done by signing the below affidavit in lieu
of an inspection.

*****PLEASE READ AND SIGN*****

I hereby certify that a minimum of one smoke detector is installed and is operational on each level of this residential structure in the immediate
vicinity of the sleeping rooms. I further certify that a minimum of one carbon monoxide detector is installed and operational in the vicinity of the
sleeping rooms. Also, I understand that failure to install and maintain these devices in an operational condition is a violation of the New Jersey
Administrative Code 5:23 and may subject me to penalties as prescribed by law.

NAME: Dawn Mae Zavala
SIGNATURE: X
BLOCK: 526 LOT: 1 ADDRESS: 983 Roswood
DATE: 6/23/05



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received _____
Date Issued _____
Control # _____
Permit # _____

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

Block 526 Apt 1
Work Site Location 983 Rosewood Ave
Owner in Fee JOANN Mae Zavala
Address 983 Rosewood Ave
Black Mt. 08123
Tele. [REDACTED]
Contractor SELF
Address _____
Tele. (____) _____
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. _____ or Social Security No. _____

C. CERTIFICATION IN LIEU OF OATH

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

Signature X [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

JOB SUMMARY (Office Use Only)

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

TYPE OF WORK:

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

**(Office Use Only)
FEE**

\$ _____

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:

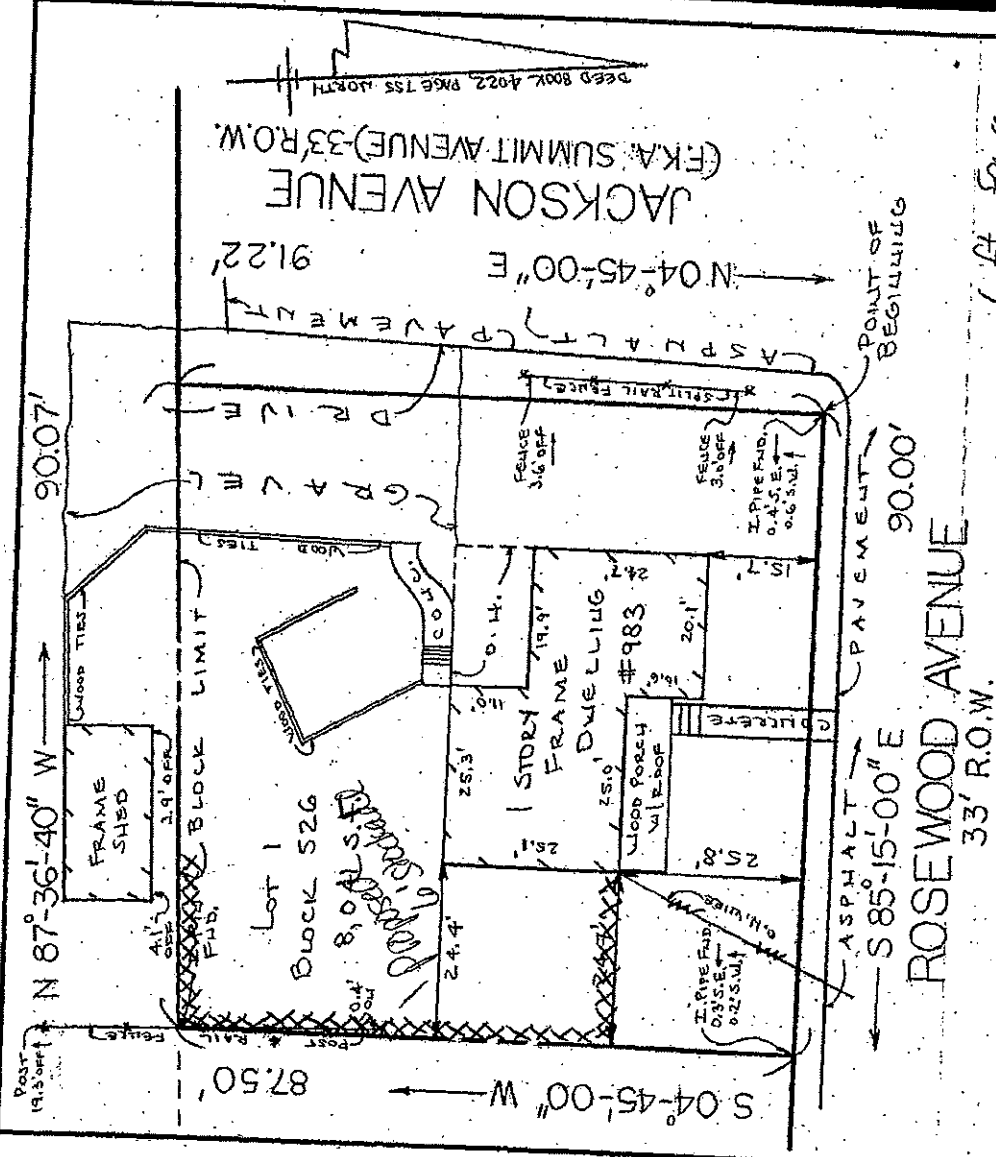
1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1 + 2) \$ _____

Administrative Surcharge \$ _____

Paid ☐ Check # _____ Minimum Fee \$ _____

Collected by: _____ DCA TRAINING FEE \$ _____

TOTAL FEE \$ _____



This Survey Certified To:

Joanne Mae Zarate
Boardwalk Title Agency, Inc. BT4579-04
Old Republic National Title Insurance Company
1st 2nd Mortgage Co. of NJ, Inc., its
successors and/or assigns as their interests may appear
Christine L. Matus, LLC

Being known and designated as Lot 1, Block 526 as shown on the Tax Maps of the Township of Brick. Being also known as part of Lots 1, 2, 3, 4 and 5, Block 21 as shown on a certain map entitled "Cedarwood Park Subdivision C Annex" situated in the Township of Brick, Ocean County, New Jersey. Filed in the Ocean County Clerk's office on April 7, 1942 as Map #B-315.

A written waiver and direction not to set corner markers has been obtained from the ultimate user pursuant to P.L. 2003, c.14 (C45:8-36.3) and N.J.A.C. 13:40-5.1 (d).

THIS PROPERTY IS SUBJECT TO ANY RESTRICTIONS, COVENANTS, EASEMENTS OR AGREEMENTS EITHER WRITTEN OR IMPLIED. THE OFFSETS SHOWN ARE NOT TO BE USED FOR THE CONSTRUCTION OF ANY STRUCTURE, FENCE, ETC.

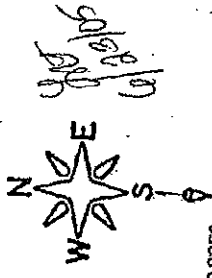
**PLAN OF SURVEY BEING LOT 1, BLOCK 526
SITUATED IN THE TOWNSHIP OF BRICK,
OCEAN COUNTY, NEW JERSEY**

I HEREBY CERTIFY TO THE BEST OF MY KNOWLEDGE, BELIEF AND INFORMATION, THAT THIS SURVEY HAS BEEN PERFORMED IN ACCORDANCE WITH CURRENTLY ACCEPTED ACCURACY STANDARDS.

Harvey L. Larterre
HARVEY L. LATERRE, P.L.S.
LICENSED PROFESSIONAL LAND SURVEYOR
NEW JERSEY LICENSE NUMBER 19461

CERTIFICATE OF AUTHORIZATION #24G A27985600
THIS CERTIFICATION IS MADE ONLY TO THE PERSON NAMED PARTIES FOR PURCHASE AND/OR MORTGAGE OF HEREIN DELINEATED PROPERTY BY THE NAMED PURCHASER. NO LIABILITY FOR NEGLIGENCE OR LIABILITY FOR USE OF SURVEY FOR ANY OTHER PURPOSE INCLUDING BUT NOT LIMITED TO CONVEYANCE OF PROPERTY OR TO ANY OTHER PERSON NOT LIMITED IN CERTIFICATION EITHER DIRECTLY OR INDIRECTLY.

PRECISION SURVEYING TECHNOLOGY L.L.C.
55 CARTER DRIVE - SUITE L1
EDISON, N.J. 08817

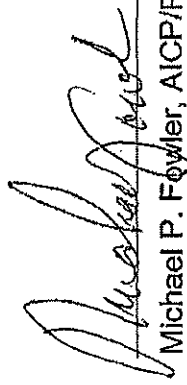


PHONE (732) 339-9350 FAX (732) 339-9354
SCALE 1"=20' DATE 8-10-04
DRAFT J.M.G. JOB NO. 04-08-016

**Township of Brick
Zoning Permit**

Approved:	Thursday, July 07, 2005	Number:	971
Block	526	Lot	1
Zone:	R-7.5		
Property Address:	983 Rosewood Avenue		
Applicant:	Joann Mae Rosate		
Property Owner	Joann Mae Rosate		
Existing Use:	Single Family Residential		
Proposed Use:	Single Family Residential		
Proposed Construction:	Vinyl wood stockade fence, six (6) feet high.		
Conditions:	The fence must be set back at least 25 feet from the front property line. The finished side of the fence must face the exterior of the lot.		

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


Michael P. Fowler, AICP/PP

Principal Planner


Sean Kinnevy

Zoning Officer

W R
TOWNS
JUN 30 2005
POLING

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

986 E. 2nd Ave
Pasadena, Ark

[illegible]

Johann Mde Zavato

MAILING ADDRESS OF APPLICANT
983 Rosewood Ave Brick, NJ 08723

983 Rosewood Ave

Joann Mae Zarate

- 100

-

-
-
-
-
-

- l, pies

l, pies

- ... that the map was
... along with the field

ation are true to the
licant will comply with

Date 6/23/05

Date 7/7/6

() Denied



CONSTRUCTION PERMIT

Date Issued 07/13/2005
Control # C-05-136413
Permit # 05-2760

IDENTIFICATION Block 526 Lot 1 Qualifier
Work Site Location: 983 ROSEWOOD AVE. NJ Contractor ZARATE, JOANN MAE
Address 983 ROSEWOOD AVE. NJ
Owner in Fee ZARATE, JOANN MAE
Address 983 ROSEWOOD AVE. NJ
Telephone: Telephone:
Lic. No. or Bids. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

6' WOOD/VINYL STOCKADE FENCE

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 \$0

Construction Official Date 07/13/2005

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

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

PAYMENTS (Office Use Only)	
Building	\$0
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$30
Total	\$30
Check No.	
Cash	\$30
Credit	\$0
Collected By	Ann Marie Hanlon

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 for 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

Joseph C. Scarpelli, Mayor

Township Council:

Stephen C. Acropolis – President
Gregory S. Kavanagh
Anthony Matthews
Kathy M. Russell
Ruthanne Scaturro
Michael A. Thulen, Sr.
Frederick J. Underwood, Sr.



Department of Engineering
Office of the Municipal Engineer
(732) 262-1038
Fax: (732) 262-8954
<http://www.twp.bricknj.us>

Date: 6/23/05

Block: 526 Lot: 1

Property Address: 783 Rosewood Ave

I, Jovann Mac Zavata of 783 Rosewood Ave
(name) (address)

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

X J. Mac Zavata
Applicant's Signature

The following shall be submitted with this request:

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

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

FOR OFFICE USE ONLY

Approved on: 7/8/05 Signed: [Signature]

Rejected on: _____ Signed: _____

Comments:

BLOCK 526LOT 1.01

QUALIFICATION CODE _____

ADDRESS (SITE) 981 RosewoodPERMIT NO. 06-0321

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 981 Rosewood

2. Name of Owner in Fee: Anthony Galletta Tel. (732) 240-2868

Address 981 Rosewood Ave BRICK NJ 08723

street municipality zip code

3. Ownership in fee: Public _____ Private _____

4. Principal Contractor: _____ Tel. (____) _____

Address _____

License No. OR, if new home, Builder Reg. No. _____ 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	\$	<u>60</u>	
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. State Permit Fee Surcharge		<u>1</u>	
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other		<u>51</u>	
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

1. ☐ Minor Work
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

Est. Cost

Plans Rec'd by

Date Rec'd

Rejection Date

Approval Date

Re-viewer

Resubmission Dates

Re-viewer

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:
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 Out Delle Date 2-6-06

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

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

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

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

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

☐ Check if contractor.

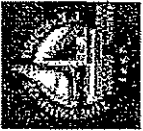
Agent Name _____

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 03/18/2008
Control Number C-06-0621
Permit Number 06-0321
Permit Issue Date 02/06/2006
Certificate Number 06-0321

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 981 ROSEWOOD AVE, Brick Township, NJ Block: 526 Lot: 1.01 Qual: _____
Owner in Fee: GALLETTO, ANTHONY & YATES, KIMBERLY
Owner Address: 981 ROSEWOOD AVE BRICK NJ 08723
Telephone: _____
Contractor GALLETTO, ANTHONY & YATES, KIMBERLY
Address 981 ROSEWOOD AVE BRICK NJ 08723
Telephone: _____ 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: NEW ROOF

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: _____



CONSTRUCTION PERMIT

Date Issued 02/06/2006
Control # C-06-0621
Permit # 06-0321

IDENTIFICATION Block: 526 Lot: 1.01 Qualifier
Work Site Location: 981 ROSEWOOD AVE. Brick Township, NJ Contractor GALLETT, ANTHONY & YATES, KIMBERLY
Address 981 ROSEWOOD AVE. BRICK NJ 08723
Owner in Fee GALLETT, ANTHONY & YATES, KIMBERLY
Address 981 ROSEWOOD AVE. BRICK NJ 08723
Telephone:
Lic. No. or Bldgs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

NEW ROOF

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 \$800

Construction Official

02/06/2006
Date

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

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

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below.

Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and for air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☐ A complete copy of released plans must be kept on the job site.
If you do not understand any of this information, please ask.

PAYMENTS (Office Use Only)	
Building	\$50
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	
Other	\$0
Total	\$51
Check No.	315
Cash	\$0
Credit	\$0
Collected By	Ann Marie Hanlon



BUILDING 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 526 Lot 1.01 Qualification Code _____
Work Site Location 981 Rosewood Ave BRIDGEWATER 08723

Owner In Fee Anthony Gallitto
Address 981 Rosewood Ave

Tel. (____) _____
Contractor _____
Address _____

Tel. (____) _____ FAX (____) _____
Contractor License No. or Builder Registration No. _____
Federal Emp. No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)	
				Type:	Failure	Failure	Approval
☐	No Plans Required	_____	_____	_____	_____	_____	_____
☐	All	_____	_____	Footling	_____	_____	_____
☐	Footling	_____	_____	Footling Bonding	_____	_____	_____
☐	Foundation	_____	_____	Foundation	_____	_____	_____
☐	Frame	_____	_____	Slab	_____	_____	_____
☐	Other	_____	_____	Frame	_____	_____	_____
Joint Plan Review Required:				Truss Sys./Bracing	_____	_____	_____
☐	Elec.	☐	Plumb.	Barrier-Free	_____	_____	_____
☐	Fire	☐	Elevator	Insulation	_____	_____	_____
SUBCODE APPROVAL				Finishes -Base Layer	_____	_____	_____
☐	CO	☐	CCO	Finishes -Final	_____	_____	_____
☐	CA	_____		Energy	_____	_____	_____
Date: <u>3-18-08</u>				Mechanical	_____	_____	_____
Approved by: <u>[Signature]</u>				TCO	_____	_____	_____
				Other	_____	_____	_____
				Final	_____	_____	_____
				Barrier-Free	_____	_____	_____

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Rehabilitation \$ 800
3. Total (1+ 2) \$ _____

Date Received
Control #

Date Issued 2/6/06
Permit # 06-0324

C. CERTIFICATION IN LIEU OF OATH

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

Signature [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

re-roof
tear off

TYPE OF WORK:

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

FEE (Office Use Only)

\$ 50

Administrative Surcharge \$ _____

Minimum Fee \$ 1

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ 51

Applicable to Ordinance 720-92

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

TOWNSHIP OF BRICK
Debris Form

Work Site Address: 981 Rosewood Ave
Block: 526 Lot: 101
Contractor: Anthony Galletti
Contractor's Address: 981 Rosewood
Type of Construction (minor, new home): Reos
Type of Debris (shingles, siding, wood, etc.): Shingles
Party responsible for removal: Anthony Galletti
Dumpster size: 10 yds
Destination of debris: _____

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

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

Chip _____ Date Feb. 6, 06
Signature

Anthony Galletti
Print Name

772-97

APR 6 1997



CONSTRUCTION PERMIT APPLICATION

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ 60.		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee	2.		
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ 62.7		

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 _____ sq. ft.
 no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

II. PROPOSED WORK

1. ☐ Minor work
(single trade)
 2. ☒ Small Job (\$5,000
and no prior approvals)
 3. ☐ New Building
 4. ☐ Addition
 5. ☐ Alteration
 6. ☐ Fire Protection
 7. ☐ Plumbing
 8. ☐ Electrical
 9. ☐ Elevator Devices
 10. ☐ Asbestos Abatement
 11. ☐ Demolition
- TOTAL COSTS**

Est. final

2050.00

OPTIONAL (for office use only)[illegible]

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 | 4. ☐ Refrigeration Systems | 7. ☐ Sprinklers |
| 2. ☐ High Pressure Boilers | 5. ☐ Cross-Connections/Backflow
Preventers | 8. ☐ Smoke Control Systems in Open Wells |
| 3. ☐ Pressure Vessels | 6. ☐ Hazardous Uses/Places of Assembly | 9. ☐ Underground Storage Tanks |

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

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

No of dwelling units:

Before Construction

After Construction

Net gain or loss

B. NON-RESIDENTIAL

1. State Specific Use: .
2. Use Group:
3. Change in Use Group:
Indicate Former:

LDS BR 10311425

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.

A Signature Debbie Clayton Date 4.8.97

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

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

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

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

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

☐ Check if contractor.

Agent Name _____

Address _____

Telephone (_____) _____

Signature _____ Date _____

OFFICE DATE RECEIVED: _____

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

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. _____	_____	_____	_____	_____



CONSTRUCTION PERMIT

Date Issued

4-8-97

Control #

Permit #

772-97

IDENTIFICATION Block

526

Lot

1.01

Work Site Location

781 Rosewood Ave

Contractor

Self

Address

Owner in Fee

Debbie Clayton

Address

Self

Tele. ()

**0002*

Lic. No. or Bldrs. Reg. No.

Exp. Date

772

e. ()

Federal Emp. No.

BLOCK

or Social Security No.

526 H

hereby granted permission to perform the following work:

☒ BUILDING

☐ PLUMBING

☐ OTHER

☐ ELECTRICAL

☐ FIRE PROTECTION

☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

Siding

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

Estimated Cost of Work \$

2,000.

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

1.01

Building

60, BUILDING

Electrical

D.C.A.

Plumbing

TOTAL

Fire Protection

CHECK

Elevator Devices

CHANGE

Other 4/08/97 NM 5

00026005

DCA Training Fee

2, -

Cert. of Occ.

Other

Total

62, -

Check No.

182

Cash

Collected By:

(see reverse side)

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.16. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that work installed conforms to the approved plans and 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 inspection specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections must 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 given.

Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case of pile foundations, inspections must 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 and connections prior to covering with finish or infill material; plumbing underground services, roof piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies. A complete copy of approved plans must be kept on the job site.

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



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

4-8-97
772-97

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

Block 526 Lot 1.01
Work Site Location 981 Rosewood Ave
Brick NJ 08723
Owner in Fee Debbie Clayton
Address 981 Rosewood Ave
Brick NJ 08723
Tele. [REDACTED]
Contractor ATI
Address _____
Tele. (____) _____
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. _____ or Social Security No. _____

C. CERTIFICATION IN LIEU OF OATH

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

Signature Debbie Clayton

**D. TECHNICAL SITE DATA
DESCRIPTION OF WORK**

JOB SUMMARY (Office Use Only)

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

TYPE OF WORK:

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

**(Office Use Only)
FEE**

\$ _____

B. BUILDING CHARACTERISTICS

Use Group Present R.3 Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ Ft.
Area—Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1+2) \$ _____

Administrative Surcharge \$ _____
Paid ☐ Check # _____ Minimum Fee \$ _____
Collected by: _____ DCA TRAINING FEE \$ _____
TOTAL FEE \$ _____



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

4-8-97
772-97

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

Block 5260 Lot 1.01
Work Site Location 951 Rosewood Ave
15112 N1 OK 723
Owner in Fee Robert Clauton
Address 951 Rosewood Ave
15112 N1 OK 723
Tele. [REDACTED]
Contractor SPR
Address _____
Tele. (____) _____
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. _____ or Social Security No. _____

C. CERTIFICATION IN LIEU OF OATH

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

Signature [Signature]

**D. TECHNICAL SITE DATA
DESCRIPTION OF WORK**

JOB SUMMARY (Office Use Only)

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

TYPE OF WORK:

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

**(Office Use Only)
FEE**

\$ _____

B. BUILDING CHARACTERISTICS

Use Group Present R.3 Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ Ft.
Area—Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1+2) \$ _____

Administrative Surcharge

Paid ☐ Check # _____ Minimum Fee \$ _____
Collected by: _____ DCA TRAINING FEE \$ _____
TOTAL FEE \$ _____

X BLOCK 527 LOT 19 QUALIFICATION CODE _____ ADDRESS (SITE) 982 Rosewood Ave PERMIT NO. 04 3524



CONSTRUCTION PERMIT APPLICATION

006-89

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

I. IDENTIFICATION

1. Proposed Work Site at: 982 Rosewood Ave

2. Name of Owner in Fee: Theresa A. Kennedy Tel. () _____
Address 982 Rosewood Ave Boick NUT 08723
street municipality zip code

3. Ownership in fee: Public _____ Private _____

4. Principal Contractor: Missing Link Fence Co Tel. () 732-920-1234
Address 333 Drum Point Road
License No. OR, if new home, Builder Reg. No. _____ 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	\$ <u>8</u>		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$ <u>1</u>		
9. State Permit Fee Surcharge			
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>15.94</u>		

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	

penel

OPTIONAL (for office use only)

II. PROPOSED WORK	Est. Cost	Plan Ref'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
1. ☐ Minor Work			<u>8/5/04</u>		<u>8/13/04</u>	<u>CA</u>	<u>1-26-07</u>		
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			<u>8/12/04</u>		<u>8/12/04</u>	<u>M</u>			
TOTAL COSTS									

VII. DESCRIPTION OF BUILDING USE

- A. RESIDENTIAL**
- State Specific Use:
 - Use Group:
 - Change in Use Group, Indicate Former:
 - No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____
- B. NON-RESIDENTIAL**
- State Specific Use:
 - Use Group:
 - Change in Use Group, Indicate Former:

III. DO YOU WANT: (optional)

- ☐ Partial Releases
- ☐ Prototype Processing

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

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

Date 08-5-04

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

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

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

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

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

☐ Check if contractor.

Agent Name _____

Address _____

Telephone (____) _____

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

IMPORTANT
 A.H.B.T. - EXEMPT

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. _____	_____	_____	_____	_____

FOR OFFICE USE ONLY

Constituent Contact Report

Date	Comments	Initials

☐ Zoning Application deemed complete

Initialed: _____

Date: _____

☐ Zoning Application approved

Initialed: _____

Date: _____

☐ Zoning permit updates:



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 02/13/2007
Tracking Number _____
Permit Number 04-3524
Permit Issue Date 08/17/2004
Certificate Number 04-3524

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 982 ROSEWOOD AVE, FENCE, NJ Block: 527 Lot: 19 Qual: _____

Owner in Fee: KENNEDY, THERESA A

Owner Address: SAME BRICK NJ 08723-

Telephone: / -

Contractor _____

Address _____

Telephone: _____ Fax: _____

License Number or Builders Registration Number: _____ Federal Emp. Number: _____

Home Warranty Number: _____

Type of Warranty Plan: ☐ State ☐ Private

Use Group: U _____ 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

Fee: \$0.00

Check Number: 513

Collected By: _____

Date Printed: 02/13/2007

Page 1

C3E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 08/17/2004
Control #
Permit # 04-3524

UCC NEW JERSEY
CONSTRUCTION
PERMITS

IDENTIFICATION Block 527 Lot 19 Qual

Work Site Location 982 ROSEWOOD AVE.

Contractor MISSING LINK FENCE

FENCE

Address DRUM POINT

Owner in Fee KENNEDY, THERESA A

BRICK, NJ 08723-

Address SAFE

Telephone (732) 920-1234

BRICK, NJ 08723-

Lic. No. or Bldrs. Reg. No.

Telephone () -

Federal Emp. No. 22-6818570

08/17/04 2:05PM 001558#2019
**07 SERV.007

Is hereby granted permission to perform the following work:

☒ BUILDING	☐ PLUMBING	☐ LEAD HAZARD ABATEMENT
☐ ELECTRICAL	☐ FIRE PROTECTION	☐ DEMOLITION
☐ ELEVATOR DEVICES	☐ ASBESTOS ABATEMENT	☐ OTHER <u></u>

(Subchapter 8 only)

DESCRIPTION OF WORK:

4' CHAINLINK FENCE

PAYMENTS (Office Use Only)

Building	<u>8</u>
Electrical	<u>0</u>
Plumbing	<u>0</u>
Fire Protection	<u>0</u>
Elevator Devices	<u>0</u>
Other	<u></u>
DCA State Permit Fee	<u>1</u>
Cart. of Occupancy	<u>0</u>
Other	<u></u>
Total	<u>9</u>
Check No.	<u>513</u>
Cash	<u></u>
Collected By	<u>ERP</u>

#043524	
BUILDING	\$8.00
DCA	\$1.00
ZPA	\$15.00
CHECK	\$24.00

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

Estimated Cost of Work \$ 470

D. L. Newman Jr.
Construction Official

08/17/2004

Date

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/05/2004
Date Issued 8/11/04
Control # 006-89
Permit # 043524

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

Block 527 Lot 19 Qual _____
Work Site Location 982 ROSEWOOD AVE.
FENCE

Owner in Fee KENNEDY, THERESA A
Address SAME
BRICK, NJ 08723-

Tele. () _____
Contractor MISSING LINK FENCE
Address DRUM POINT
BRICK, NJ 08723-

Tele. (732) 920-1234 Fax () _____
Lic. No. or Bids. Reg. No. _____
Federal Emp. No. 22-6818570

C. CERTIFICATION IN LIEU OF OATH

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

Signature _____

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

4' CHAINLINK FENCE

10' From Street Pavement

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☒ No Plans Req. 8-13-04 km

☒ All _____

☐ Footing _____

☐ Foundation _____

☐ Frame _____

☐ Other _____

Joint Plan Review Required:

☐ Elect ☐ Plumb ☐ Fire

SUBCODE APPROVAL ☐ Elev

☐ CO ☐ CCO ☐ CA

Date: 1-26-07

Approved By: km

INSPECTIONS

Dates (Month/Day)

Type Failure Failure Approval Initial

Footing _____

Foundation _____

Slab _____

Frame _____

BarrierFree _____

Insulation _____

Finishes _____

Energy _____

Mechanical _____

SCO _____

Other _____

Final _____

BarrierFree _____

TYPE OF WORK

☐ New Building

☐ Addition

☒ Alteration

☐ Roofing

☐ Siding

☐ Fence _____ Height (exceeds 6')

☐ Sign _____ Sq. Ft.

☐ Pool

☐ Asbestos Abatement Subchapter 8

☐ Lead Haz. Abatement NJAC 5:17

☒ Other FENCE

Other _____

☐ Demolition

FEE (Office Use Only)

\$ _____

B. BUILDING CHARACTERISTICS

Use Group Present U Proposed U

Constr. Class Present _____ Proposed _____

No. of Stories _____

Height of Structure _____ 0 Ft.

Area Largest Floor _____ 0 Sq. Ft.

New Bldg. Area/All Floors _____ 0 Sq. Ft.

Volume of New Structure _____ 0 Cu. Ft.

Total Land Area Disturbed _____ 0 Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____

2. Alteration \$ 470

3. Total (1+2) \$ 470

Industrialized Building:

☐ State Approved

☐ HUD

Administrative Surcharge

Paid ☐ Check \$ _____ Minimum Fee

Collected by: _____ TOTAL FEE

DCA State Permit Fee

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/05/2004
Date Issued 8/10/04
Control # C06-89-04
Permit # 043524

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

Block 527 Lot 19 Qual
Work Site Location 992 ROSEWOOD AVE.

FENCE

Owner in Fee KENNEDY, THERESA A

Address SAME

BRICK, NJ 08723-

Tele. ()

Contractor MISSING LINK FENCE

Address DRUM POINT

BRICK, NJ 08723-

Tele. (732) 920-1234 Fax ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 22-6818570

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

4' CHAINLINK FENCE

10' From Street Pavement

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☒ No Plans Req	9-13-04	EM	Type	Failure Failure Approval Initial
☒ All			Footings	
☐ Footings			Foundation	
☐ Foundation			Slab	
☐ Frame			Frame	
☐ Other			BarrierFree	
Joint Plan Review Required:			Insulation	
☐ Elect ☐ Plumb ☐ Fire			Finishes	
SUBCODE APPROVAL ☐ Elev			Energy	
☐ CO ☐ CCO ☐ CA			Mechanical	
Date:			TCO	
Approved By:			Other	
			Final	
			BarrierFree	

B. BUILDING CHARACTERISTICS

Use Group	Present	U	Proposed	U	Est. Cost of Bldg. Work:
Constr. Class	Present		Proposed		1. New Bldg. \$ 0
No. of Stories					2. Alteration \$ 470
Height of Structure					3. Total (1+2) \$ 470
Area Largest Floor					
New Bldg. Area/All Floors					Industrialized Building:
Volume of New Structure					☐ State Approved
Total Land Area Disturbed					☐ HUD

TYPE OF WORK	FEE (Office Use Only)
☐ New Building	\$ 0
☐ Addition	0
☒ Alteration	0
☐ Roofing	0
☐ Siding	0
☐ Fence 0 Height (exceeds 6')	0
☐ Sign 0 Sq. Ft.	0
☐ Pool	0
☐ Asbestos Abatement Subchapter 8	0
☐ Lead Haz. Abatement NJAC 5:17	0
☒ Other FENCE	8
Other	0
☐ Demolition	0

	Administrative Surcharge	\$
Paid ☐ Check #	Minimum Fee	0
Collected by:	TOTAL FEE	8
	DCA State Permit Fee	1

NJ UCCARS 5.24E
TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 08/05/2004
Date Issued 8/10/04
Control # C06-89-104
Permit # 04-2524

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

Block 527 Lot 19 Qual _____
Work Site Location 982 ROSEWOOD AVE.

FENCE
Owner in Fee KENNEDY, THERESA A

Address SAVR
BRICK, NJ 08723-

Tele. () - _____
Contractor MISSING LINK FENCE

Address DRUM POINT
BRICK, NJ 08723-

Tele. (732) 920-1234 Fax () _____
Lic. No. or Bldrs. Reg. No. _____

Federal Emp. No. 22-6818570

C. CERTIFICATION IN LIEU OF OATH

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

Signature _____

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

4' CHAINLINK FENCE

10' From Street Pavement

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☒ No Plans Req.	8-13-04	EM	Type	Failure Failure Approval Initial
☒ All			Footings	
☐ Footing			Foundation	
☐ Foundation			Slab	
☐ Frame			Frame	
☐ Other			BarrierFree	
Joint Plan Review Required:			Insulation	
☐ Elect ☐ Plumb ☐ Fire			Finishes	
SUBCODE APPROVAL ☐ Elev			Energy	
☐ CO ☐ CCO ☐ CA			Mechanical	
Date: _____			TCO	
Approved By: _____			Other	
			Final	
			BarrierFree	

B. BUILDING CHARACTERISTICS

Use Group	Present	U	Proposed	U	Est. Cost of Bldg. Work:
Constr. Class	Present		Proposed		1. New Bldg. \$ _____
No. of Stories		0			2. Alteration \$ 470
Height of Structure		0 Ft.			3. Total (1+2) \$ 470
Area - Largest Floor		0 Sq. Ft.			Industrialized Building:
New Bldg. Area/All Floors		0 Sq. Ft.			☐ State Approved
Volume of New Structure		0 Cu. Ft.			☐ HUD
Total Land Area Disturbed		0 Sq. Ft.			

TYPE OF WORK

☐ New Building	
☐ Addition	
☒ Alteration	
☐ Roofing	
☐ Siding	
☐ Fence 0 Height (exceeds 6')	
☐ Sign 0 Sq. Ft.	
☐ Pool	
☐ Asbestos Abatement Subchapter 8	
☐ Lead Haz. Abatement NJAC 5:17	
☒ Other FENCE	
Other	
☐ Demolition	

FEE (Office Use Only)

\$	0
\$	0
\$	0
\$	0
\$	0
\$	0
\$	0
\$	0
\$	0
\$	0
\$	8
\$	0
\$	0

Administrative Surcharge \$ _____
Paid ☐ Check \$ _____ Minimum Fee \$ _____
Collected by: _____ TOTAL FEE \$ 8
DCA State Permit Fee \$ 1

Site Location: 982 Rosewood Ave Brick, N.J. 08723
Block: 527 Lot: 19
Owner's Name: Theresa A. Kennedy
Owner's Mailing Address: 982 Rosewood Ave Brick, N.J. 08723
Phone: () -

BUILDING

X Contractor: Missins Lince Fence Co
Address: 333 DAWM POINT ROAD
Phone#: _____
Lis # _____
Federal Emp # or SSN _____

Technical Data

Description of Work: _____

4' Chain Link

ELECTRICAL

Contractor: _____
Address: _____
Phone#: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data

Item _____ Quantity _____

Lighting Fixtures _____
Receptacles _____
Switches _____
Detectors _____
Light Poles _____
Motors w/ Fract. HP _____
Emergency & Exit Lights _____
Communication Points _____
Alarm Devices/FAC Panel _____
Total _____

Type of Work

____ New Building _____ Siding _____
____ Addition _____ Fence _____
____ Alteration _____ Pool _____
____ Roofing _____ Demolition _____
____ Asbestos Abatement _____ Sign _____ sq ft
____ Fireplace wd/gas _____

Building Characteristics

Use Group Present: _____ Proposed: _____
No of Stories: _____
Height of Structure: _____
Area of the largest floor: _____
Area of New Structure: _____
Volume of New Structure: _____
Total Land Disturbed: _____

Cost of Alteration: \$ _____

Cost of New Building: \$ _____

Cost of Site Work \$ 469.85 Fence

Total Cost of New Building Work: \$ _____

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

Pool (Receptacles, Switches, Lights, Motor IHP) _____
Spa/Hot Tub/Storable Pool _____
Electric Range _____ KW
Oven/Surface Unit _____ KW
Electric Water Heater _____ KW
Electric Dryer _____ KW
Dishwasher _____ KW
Garbage Disposal _____ HP
A/C Unit - Central Air _____ KW
Space Heater/Air Handler _____ KW
Baseboard Heating _____ KW
Motors 1+ HP _____
Transformer/Generator _____ KW
Light Stander _____ AMP
Service _____ AMP
Subpanel _____ AMP
Motor Control Center _____ AMP
Sign/Outline Light _____ KW
Furnace _____
Steam Boiler _____
Other: _____

Estimated Cost of Electrical Work: _____

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

Contractor: _____
Address: _____

Phone #: _____
Lic #: _____
Federal Emp # or SSN _____

Technical Data

Fixtures	Quantity
Water Closets (Toilet) _____	
Urinals/Bidets _____	
Bath Tub (w/or w/out shower head) _____	
Lavatory (BR Sink) _____	
Shower _____	
Floor Drain _____	
Sink _____	
Dishwasher _____	
Drinking Fountain _____	
Washing Machine _____	
Hose Bib _____	
Gas Piping _____	
Fuel Oil Piping _____	
Water Heater _____	
Steam Boiler _____	
Hot Water Boiler _____	
Sewer Pump _____	
Interceptor/Separator _____	
Backflow Preventer _____	
Grease trap _____	
Air Conditioner (Condensate Drain) _____	
Septic Tank Closure _____	
Sewer Service Connection _____	
Water Service Connection _____	
Active Solar System _____	
Auxiliary Meter _____	
Sprinkler Heads _____	
Sump Pump _____	
Pool Heater _____	
Other: _____	

Estimated Cost of Plumbing Work _____

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

Signature: _____
Please Print Name: _____

CONTRACTOR'S SEAL

Contractor: _____
Address: _____

Phone #: _____
Lic #: _____
Federal Emp # or SSN _____

Technical Data

Description of Work:

Heating Type: _____ Gas _____ Oil _____ Electric _____ Solar _____
Heating System is _____ New _____ Existing _____
Location of Furnace/Boiler: _____
Water Supply Source _____
Method of Valve Supervision _____
Local Alarm Supervision _____
Central Supervision: _____
Proprietary Supervision: _____

Flammable Storage Tanks _____ capacity _____ fuel _____
Combustible Storage Tanks _____ capacity _____ fuel _____
LPG Storage Tanks _____ capacity _____ fuel _____

Item _____ Quantity _____

Wet Sprinkler Heads _____
Dry Sprinkler Heads _____
Total _____

Smoke Detectors _____
Heat Detectors _____
Total _____

Stand Pipes _____
Kitchen Hood Exhaust System _____

Pre-Engineered Systems:
CO2 Suppression _____
Halon Suppression _____
Foam Suppression _____
Dry Chemical _____
Wet Chemical _____

Gas/ Oil Fired Appliances:

Gas Stove _____
Gas Dryer _____
Furnace (Gas or Oil) _____
Gas Fireplace _____
Gas Logs _____
Total Appliances _____

Wood Burning Stove _____
Wood Fireplace _____
Other: _____

Estimated Cost of Fire Work _____

I hereby certify that I am the agent/owner of record and am authorized to make this application and perform the work

Township of Brick Zoning Permit

Approved: Tuesday, August 10, 2004 Number: 1243

Block 527 Lot 19 Zone: R-7.5

Property Address: 982 Rosewood Avenue

Applicant: Theresa A. Kennedy

Property Owner: Theresa A. Kennedy

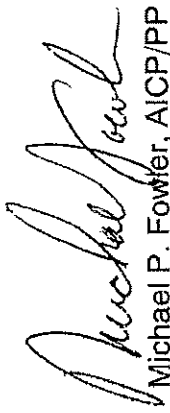
Existing Use: Single Family Residential

Proposed Use: Single Family Residential

Proposed Construction: 4' high chain link fence.

Conditions: The 4' high chain link fence must be set back at least 10 feet from the street pavement.

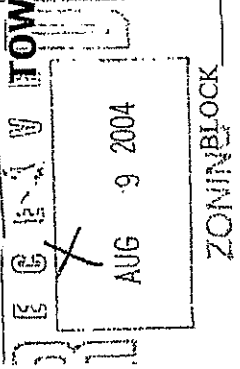
This permit shall be null, void and of no effect if any of the facts contained in the application upon the basis that this permit was granted are false or untrue in any material respect. This permit shall expire one (1) year after the date of issuance if the use or substantial construction has not been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


Michael P. Fowler, AICP/PP

Municipal Planner


Sean Kinnevy

Zoning Officer



TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

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

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

ZONING BLOCK 527 LOT 19 QUALIFIER _____

PROPERTY ADDRESS 982 Rosewood Ave

PERSONAL NAME OF APPLICANT Theresa A. Kennedy

BUSINESS NAME OF APPLICANT _____

MAILING ADDRESS OF APPLICANT 982 Rosewood Ave Brick, N.J 08723

PROPERTY OWNER'S FULL NAME Theresa A. Kennedy

PRESENT USE OF PROPERTY (check all that apply)

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

PROPOSED USE OF PROPERTY (check all that apply)

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

PROPOSED CONSTRUCTION (check all that apply)

- ☐ New Building (please describe) _____ Height _____
☐ Addition - Height _____
☐ Alteration _____
☐ Porch or deck - Height _____
☐ Shed - Height _____
☒ Fence - Type Chain Link Height 4'
☐ Swimming Pool ☐ in-ground ☐ above-ground
☐ Other (please describe) _____

CHECKLIST

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

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

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

SIGNATURE OF APPLICANT Theresa A. Kennedy Date 8-8-08

Reviewed by Zoning Office _____ Date 8/10/08 Approved () Denied

March 2003 _____

12/15/04

FENCE CHECK LIST

- | | | |
|---|---|-----------------------------|
| 1. Construction jacket signed and completed | Yes ☒ | No ☐ |
| 2. Zoning application signed and completed | Yes ☒ | No ☐ |
| 3. Two TRUE SIZE surveys indicating with X's, the location of the fence, height & type proposed | Yes ☒ | No ☐ |
| 4. Building subcode information completed (including cost of work) | Yes ☒ | No ☐ |
| 5. Engineering form completed | Yes ☒ | No ☐ |

+

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

Joseph C. Scarpelli, Mayor

Township Council:

Stephen C. Acropolis – President
Gregory S. Kavanagh
Anthony Matthews
Kathy M. Russell
Ruthanne Scaturro
Michael A. Thulen, Sr.
Frederick J. Underwood, Sr.



Department of Engineering
Office of the Municipal Engineer
(732) 262-1038
Fax: (732) 262-8954
<http://www.twp.brick.nj.us>

Date: 8-5-04

Block: 527 Lot: 19

Property Address: 982 Rosewood Ave

I, Theresa A-Kennedy of 982 Rosewood Ave Brick
(name) (address)

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

Theresa A-Kennedy
Applicant's Signature

The following shall be submitted with this request:

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

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

FOR OFFICE USE ONLY

Approved on: 8/12/04

Signed: [Signature]

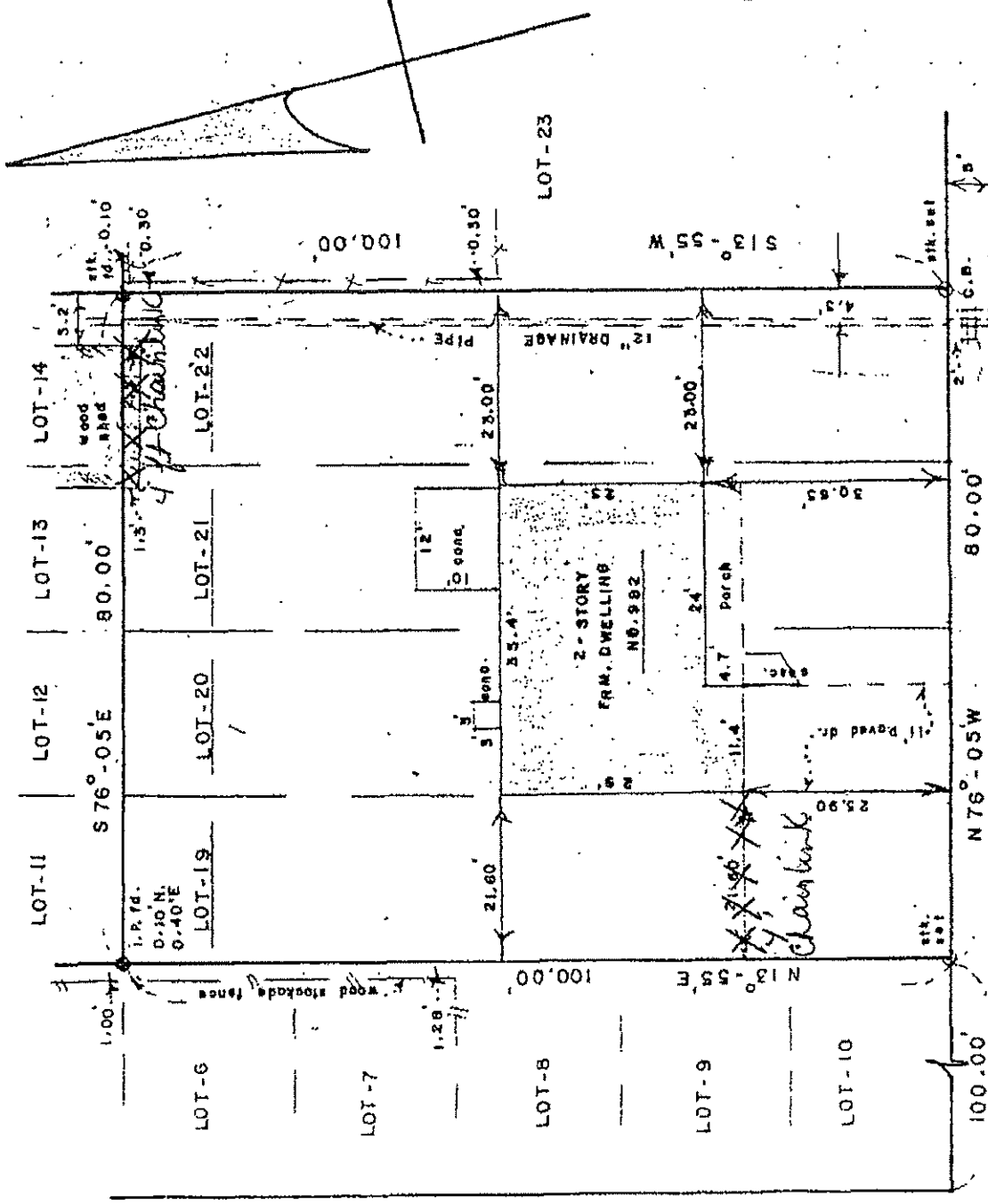
Rejected on: _____

Signed: _____

Comments:

SURVEY OF

LOTS-19, 20, 21, 22
BRICK TOWNSHIP
BLOCK-527-20 (T.M.)
OCEAN COUNTY, N. J.
BEING LOTS-19, 20, 21 & 22, BLOCK-20 ON A MAP ENTITLED "CEDARWOOD PARK, SUBDIVISION - C ANNEX, OCEAN COUNTY, N. J.," FILED IN THE O.C.C.O. APRIL 7, 1942 AS MAP NO. B-315.



ROSEWOOD AVE. (33')

IFIED TO; JAMES KENNEDY & THERESA KENNEDY; GARDEN STATE BANK; CONTINENTAL TITLE INSURANCE COMPANY; & JERRY LEPS, ATTY.

MARTIN BYRNE & ASSOC.
SURVEYOR PLANNER
43 CEDARWOOD DR., TOMS RIVER, N.J.
LIC. LAND SURVEYOR NO. 13913
PROFESSIONAL PLANNER NO. 1545
TEL. 201-240-3106

Martin P. Byrne L.S. NO. 13913

10-12-83 SCALE: 1"=20' 83-1818

LDS BR 10511708

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' 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 Theresa A. Kennedy Date 4-22-99

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

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

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

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

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

☐ Check if contractor.

Agent Name _____

Address _____

Telephone (_____) _____

Signature _____

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

OFFICE DATE RECEIVED: _____

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

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

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

X. CERTIFICATES ISSUED (office use only)

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

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
CONSTRUCTION
PERMIT

00002
991152**#
BLOCK 527 # 0.00
LOT 19 # 0.00
BUILDING 38.00
D.C.A. 1.00
TOTAL 39.00
CASH 39.00
CHANGE 0.00
04/22/99 NO. 5 0049A005 14:15

Date Issued 04/22/99
Control #
Permit # 99-1152

IDENTIFICATION Block 527 Lot 19 Qual

Work Site Location 982 ROSEWOOD AVE.

RE-ROOF

Owner in Fee THERESE KENNEDY

Address SAME

BRICK, NJ 08723-

Telephone ()

Contractor HOMEOWNER

Address

Telephone ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. HO-

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

RE-ROOF

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 \$ 1,100

Construction Official

04/22/99
Date

U.C.C. F170 (rev. 3/96)

PAYMENTS (Office Use Only)

Building 38
Electrical 0
Plumbing 0
Fire Protection 0
Elevator Devices 0
Other
DCA Training Fee 1
Cert. of Occupancy 0
Other
Total 39
Check No.
Cash X
Collected By WP

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 04/22/99
Date Issued 04/22/99
Control #
Permit # 99-1152

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

Block 327 Lot 19 Qual
Work Site Location 922 ROSEWOOD AVE.

RE-ROOF

Owner in Fee THERESE KENNEDY

Address SAME

BRICK, NJ 08723-

Tele. ()

Contractor

Address

Tele. () Fax ()

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. HO-

C. CERTIFICATION IN LIEU OF OATH

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

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

RE-ROOF

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Req.			Type	Failure Failure Approval Initial
☐ All			Footings	
☐ Footings			Foundation	
☐ Foundation			Slab	
☐ Frame			Frame	
☐ Other			BarrierFree	
Joint Plan Review Required:			Insulation	
☐ Elect	☐ Plumb	☐ Fire	Finishes	
SUBCODE APPROVAL			Energy	
☐ CO	☐ CCO	☐ CA	Mechanical	
Date: 8-13-00			TCO	
Approved By: [Signature]			Other	
			Final	
			BarrierFree	

B. BUILDING CHARACTERISTICS

Use Group	Present R-3	Proposed R-3	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed	1. New Bldg. \$ 0
No. of Stories	0		2. Alteration \$ 1,100
Height of Structure	0 Ft.		3. Total (1+2) \$ 1,100
Area Largest Floor	0 Sq. Ft.		Industrialized Building:
New Bldg. Area/All Floors	0 Sq. Ft.		☐ State Approved
Volume of New Structure	0 Cu. Ft.		☐ HUD
Total Land Area Disturbed	0 Sq. Ft.		

TYPE OF WORK	FEE (Office Use Only)
☐ New Building	\$ 0
☐ Addition	0
☒ Alteration	18
☐ Roofing	0
☐ Siding	0
☐ Fence 0 Height (exceeds 6')	0
☐ Sign 0 Sq. Ft.	0
☐ Pool	0
☐ Asbestos Abatement Subchapter 8	0
☐ Lead Haz. Abatement NJAC 5:17	0
☐ Other	0
Other	0
☐ Demolition	0

Administrative Surcharge	\$ 0
Paid ☒ Check & Cash	Minimum Fee \$ 0
Collected by: WP	TOTAL FEE \$ 18
	DCA Training Fee \$ 1

Block: 527 Lot: 17
Owner in Fee: Theresa R. Kennedy Control #:
Address:
982 Rosewood Ave
State: NJ Zip: 08723 Phone: [REDACTED] Permit #:
SS #: [REDACTED] Provide only if Applicant is owner

PLUMBING SUBCODE	BUILDING SUBCODE
CONTRACTOR: <u>Homescreen</u>	CONTRACTOR: <u>Homescreen</u>
ADDRESS:	ADDRESS: <u>982 Rosewood Ave</u>
	<u>High N.J. - 08723</u>
PHONE:	PHONE:
C.#:	LIC.#:
C.EXPIRATION DATE:	LIC. EXPIRATION DATE:
FEDERAL EMP.# (or S.S.#):	FEDERAL EMP.# (or S.S.#):
TECHNICAL SUE DATA (LIST ALL FIXTURES)	TECHNICAL SUE DATA
NO. FIXTURE/EQUIPMENT	DESCRIPTION OF WORK:

Water Closet
Urinal / Bidet
Bath Tub
Lavatory
Shower
Floor Drain
Sink
Dishwasher
Drinking Fountain
Washing Machine
Hose Bibb
Gas Piping
Fuel Oil Piping
Water Heater
Steam Boiler
Hot Water Boiler
Sewer Pump
Interceptor / Separator
Backflow Preventer
Greasetrap
Water Cooled AC or Refrig. Unit
Sewer Connection
Septic (Disposal System) Closure
Water Service Connection
Gas Service Connection
Active Solar System
Vent Through Roof
Other

Roof-over

TYPE OF WORK			
☒ New Building	☐ Fence:	Height (6' or More)	
☐ Addition	☐ Sign:	Sq. Ft.	
☐ Alteration	☐ Pool (in Ground)		
☒ Roofing	☐ Pool (Above Ground)		
☐ Siding	☐ Asbestos Abatement		
☐ Other:	☐ Demolition		
BUILDING CHARACTERISTICS			
USE GROUP	Present:	Proposed:	
CONSTR. CLASS	Present:	Proposed:	
No. of Stories:			
Height of Structure:			
Area - Largest Floor:			
New Building Area / All Floors:			
Volume of Structure:			Total Land Disturbed:

Estimated Cost of Plumbing Work: \$	Signature: <u>Theresa R. Kennedy</u>
Contractor: <u>[REDACTED]</u>	
BCODE APPROVAL:	Estimated Cost of Building Work: <u>1,100</u>
ANS: Required ☐ Approved ☐	New Building (1) \$
proved by:	Alteration (2) \$
te:	TOTAL (1+2) \$
CONTRACTOR AFFIX SEAL:	SUBCODE APPROVAL:
	DR. A.N.C. Required ☐ Approved ☐

• **RESEARCH**

CONTRACTOR: _____
ADDRESS: _____
PHONE: _____
LIC. #: _____ EXP. DATE: _____
FEDERAL EMP. # (or S.S.#): _____

TECHNICAL DATA DESCRIPTION OF WOLF

DESCRIPTION	QTY	SIZE
ITEMS		
Lighting Fixtures		
Receptacles		
Switches		
Detectors		
Light Poles		
Motors - Fract. HP		
Emergency & Exit Lights		
Communications Points		
Alarm Devices/F.A.C. Panel		

Heating Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar
 Heating Sys: ☐ New ☐ Existing
 Location of Furnace / Boiler _____

TOTAL NUMBERS

Pool Permit w/UV Lights	Water Supply Source
Storable Pool/Spa/Hot Tub	Method of Valve Supervision
KW Elec. Range / Receptacle	Local Alarm Supervision
KW Oven / Surface Unit	Central Supervision
KW Elec. Water Heater	Proprietary Supervision
KW Elec. Dryer / Receptacle	
KW Dishwasher	Flammable Liquid Storage Tanks Capacity: Eu
HP Garbage Disposal	Combustible Liquid Storage Tanks Capacity: Eu
KW Central A/C Unit	L.G.P. Storage Tanks Capacity: Eu

DESCRIPTION	NUMBER
-------------	--------

HP Motors 1/+ HP	HP	Wet Sprinkler Heads
KW Transformer/Generator	KW	Dry Sprinkler Heads
AMP Service	AMP	Total
AMP Subpanels	AMP	
AMP Motor Control Center	AMP	Smoke Detectors
AMP Elec. Sign/Outline Light	KW	Heat Detectors
Other		Total

Other	Strand Pipes
Other	Kitchen Hood Exhaust Systems

Estimated Cost of Electrical Work: \$	Pre-Engineered Systems
Signature (print name):	Co2 Suppression
Estimated Cost of Electrical Work: \$	Halon Suppression
Signature (print name):	

Owner ☐	Contractor ☐	Foam Suppression
SUBCODE APPROVAL:		Dry Chemical
PLANS:		Wet Chemical

Approved by: _____	
Date: _____	Gas or Oil Fired Appliance _____ Other _____

CONTRACTOR AFFIX SEAL:

Other _____ \$ _____
Estimated Cost of Fire Protection Work: \$ _____

BLOCK 526LOT 1.01

QUALIFICATION CODE _____

ADDRESS (SITE) 981 ROSe woodPERMIT NO. 06-0321

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 981 ROSe wood

2. Name of Owner in Fee: Anthony Gallette Tel. [REDACTED]
Address 981 ROSe wood 900 BRICK NT. 08723
street municipality zip code

3. Ownership in fee: Public _____ Private _____

4. Principal Contractor: _____ Tel. (____) _____
Address _____
License No. OR, if new home, Builder Reg. No. _____ 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	\$	<u>60</u>	
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. State Permit Fee Surcharge		<u>1</u>	
10. Subtotal	\$		
11. Cert. of Occupancy		<u>51</u>	
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)

re-roof / tear off

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: <u>3-18-06</u>	
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	<u>800</u>							

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: _____
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 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 Chit Dalal Date 2-6-06

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

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

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

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

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

☐ Check if contractor.

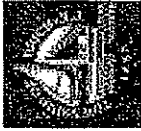
Agent Name _____

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 03/18/2008
Control Number C-06-0621
Permit Number 06-0321
Permit Issue Date 02/06/2006
Certificate Number 06-0321

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 981 ROSEWOOD AVE, Brick Township, NJ Block: 526 Lot: 1.01 Qual: _____

Owner in Fee: GALLETTO, ANTHONY & YATES, KIMBERLY

Owner Address: 981 ROSEWOOD AVE BRICK NJ 08723

Telephone: _____

Contractor GALLETTO, ANTHONY & YATES, KIMBERLY

Address 981 ROSEWOOD AVE BRICK NJ 08723

Telephone: _____ 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: NEW ROOF

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 NJACS: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: _____



CONSTRUCTION PERMIT

Date Issued 02/06/2006
Control # C-06-0621
Permit # 06-0321

IDENTIFICATION Block: 526 Lot: 1.01
Work Site Location: 981 ROSEWOOD AVE. Brick Township, NJ

Contractor
Address
GALLETTO, ANTHONY & YATES, KIMBERLY
981 ROSEWOOD AVE BRICK NJ 08723

Qualifier

GALLETTO, ANTHONY & YATES, KIMBERLY
981 ROSEWOOD AVE BRICK NJ 08723

Owner in Fee
Address
GALLETTO, ANTHONY & YATES, KIMBERLY
981 ROSEWOOD AVE BRICK NJ 08723

Telephone: _____
Lic. No. of Bldr's. Reg. No. _____
Federal Employee. No. _____

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

NEW ROOF

Note: If construction does not commence within one (1) year of date of issuance, or it
construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work \$800

Construction Official

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

02/06/2006
Date

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

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☐ A complete copy of released plans must be kept on the job site.
If you do not understand any of this information, please ask.

PAYMENTS (Office Use Only)	
Building	\$50
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	
Other	\$0
Total	\$51
Check No.	315
Cash	\$0
Credit	\$0
Collected By	Ann Marie Hanlon



BUILDING 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 526 Lot 1.01 Qualification Code _____
Work Site Location 981 Rosewood Ave BRICK N.J. 08723

Owner In Fee Anthony Gallitto
Address 981 Rosewood Ave

Tel. (____) _____
Contractor _____
Address _____

Tel. (____) _____ FAX (____) _____
Contractor License No. or Builder Registration No. _____
Federal Emp. No. _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Dates (Month/Day)	Initial
☐ No Plans Required	____	____	Type:	Failure	Failure	Approval
☐ All	____	____	Footings	____	____	____
☐ Footings	____	____	Footings Bonding	____	____	____
☐ Foundation	____	____	Foundation	____	____	____
☐ Frame	____	____	Slab	____	____	____
☐ Other	____	____	Frame	____	____	____
			Truss Sys./Bracing	____	____	____
			Barrier-Free	____	____	____
Joint Plan Review Required:			Insulation	____	____	____
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Finishes -Base Layer	____	____	____
			Finishes -Final	____	____	____
SUBCODE APPROVAL			Energy	____	____	____
☐ CO ☐ CCO ☐ CA			Mechanical	____	____	____
Date: <u>3-18-08</u>			TCO	____	____	____
Approved by: <u>[Signature]</u>			Other	____	____	____
			Final	____	____	____
			Barrier-Free	____	____	____

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Rehabilitation \$ 800
3. Total (1+ 2) \$ _____

Date Received
Control #

Date Issued 2/6/06
Permit # 06-0321

C. CERTIFICATION IN LIEU OF OATH

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

Signature [Signature]

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

re-roof
lean to

TYPE OF WORK:

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

FEE (Office Use Only)

\$ 50

Administrative Surcharge \$ _____
Minimum Fee \$ 1
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ 51

Applicable to Ordinance 720-92

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

TOWNSHIP OF BRICK
Debris Form

Work Site Address: 981 Rosewood Ave

Block: 526 Lot: 1.01

Contractor: Anthony Galletti

Contractor's Address: 981 Rosewood

Type of Construction (minor, new home): Reos

Type of Debris (shingles, siding, wood, etc.): Shingles

Party responsible for removal: Anthony Galletti

Dumpster size: 10 Yrds

Destination of debris: _____

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

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

Chad

Signature

Feb. 6, 06

Date

Anthony Galletti

Print Name

APR 8 1997



CONSTRUCTION PERMIT APPLICATION

Div. 9 **Application** **Complete**: Sections I, II, III (optional), IV, VI and VII

I. IDENTIFICATION

- I. IDENTIFICATION**
1. Proposed Work-site at: 981 Rosewood Ave
2. Name of Owner in Fee: Debbie Clayton Tel. [REDACTED]
- Address 981 Rosewood Ave BRICK NJ 08723
street municipality zip code
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: SELF Tel. (____) _____
- Address _____
- License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
- Federal Emp. No. _____ Social Security No. _____
5. Architect or Engineer _____ Tel. (____) _____
- Address _____
6. Responsible Person
in Charge of Work _____ Tel. (____) _____

II. PROPOSED WORK

1. ☐ Minor work
(single trade)
 2. ☒ Small Job (\$5,000
and no prior approvals)
 3. ☐ New Building
 4. ☐ Addition
 5. ☐ Alteration
 6. ☐ Fire Protection
 7. ☐ Plumbing
 8. ☐ Electrical
 9. ☐ Elevator Devices
 10. ☐ Asbestos Abatement
 11. ☐ Demolition
- TOTAL COSTS**

Est. Cost

2000.00

OPTIONAL (for office use only)

[illegible]

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

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ 60.		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. DCA Training Fee	2.		
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ 62.		

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 _____ sq. ft.
 no _____
11. Max. Live Load _____
12. Max. Occupancy Load _____

(office use only)

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

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

No of dwelling units:

Before Construction

After Construction

Net gain or loss _____

B. NON-RESIDENTIAL

1. State Specific Use: .
2. Use Group:
3. Change in Use Group, Indicate Former:

LDS BR 10311425

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 Debbie Clayton Date 4.8.97

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

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

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

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

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

() Check if contractor.

Agent Name _____

Address _____

Telephone (____) _____

Signature _____ Date _____

OFFICE DATE RECEIVED: _____

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

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. _____	_____	_____	_____	_____



CONSTRUCTION PERMIT

Date Issued

4-8-97

Control #

Permit #

772-97

IDENTIFICATION Block

526

Lot

1.01

Work Site Location

981 Rosewood Ave

Contractor

Self

Address

Owner in Fee

Debbie Clayton

Address

Self

Tele. ()

**0002*

Lic. No. or Bldrs. Reg. No.

Exp. Date

772

e. ()

Federal Emp. No.

BLOCK

or Social Security No.

526 H

I hereby granted permission to perform the following work:

☒ BUILDING☐ PLUMBING☐ OTHER☐ ELECTRICAL☐ FIRE PROTECTION☐ ELEVATOR DEVICES

DESCRIPTION OF WORK:

Siding

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

Estimated Cost of Work \$

2,000

CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only)

1.01

Building

60, BUILDING

Electrical

D.C.A.

Plumbing

TOTAL

Fire Protection

CHECK

Elevator Devices

CHANGE

Other

4/08/97

5

00026005

DCA Training Fee

2, -

Cert. of Occ.

Other

Total

62, -

Check No.

182

Cash

Collected By:

(see reverse side)

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.16. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that work installed conforms to the approved plans and 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 inspection 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 given.

Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case of pile foundations, inspections must 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 and connections prior to covering with finish or infill material; plumbing underground services, roof piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies. A complete copy of approved plans must be kept on the job site.

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



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

4-8-97
772-97

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

Block 526 Lot 1.01
Work Site Location 981 Rosewood Ave
Brick 08723
Owner in Fee Debbie Clayton
Address 981 Rosewood Ave
Brick 08723
Tele. [REDACTED]
Contractor SEIF
Address _____
Tele. (____) _____
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. _____ or Social Security No. _____

C. CERTIFICATION IN LIEU OF OATH

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

Signature Debbie Clayton

**D. TECHNICAL SITE DATA
DESCRIPTION OF WORK**

JOB SUMMARY (Office Use Only)

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

TYPE OF WORK:

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

**(Office Use Only)
FEE**

\$ _____

B. BUILDING CHARACTERISTICS

Use Group Present R.3 Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ Ft.
Area—Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:
1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1+2) \$ _____

Administrative Surcharge \$ _____

Paid ☐ Check # _____ Minimum Fee \$ _____

Collected by: _____ DCA TRAINING FEE \$ _____

TOTAL FEE \$ _____



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received

Date Issued

Control #

Permit #

4-8-97
772-97

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

Block 5260 Lot 1.01
Work Site Location 951 Rosewood Ave
SPICKER 01 OK 723
Owner in Fee 12611111111111111111
Address 951 Rosewood Ave
SPICKER 01 OK 723
Tele. ()
Contractor SP1R
Address _____
Tele. () _____
Lic. No. or Bldrs. Reg. No. _____
Federal Emp. No. _____ or Social Security No. _____

C. CERTIFICATION IN LIEU OF OATH

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

Signature William A. Clayton

**D. TECHNICAL SITE DATA
DESCRIPTION OF WORK**

JOB SUMMARY (Office Use Only)

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

TYPE OF WORK:

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

**(Office Use Only)
FEE**

\$ _____

B. BUILDING CHARACTERISTICS

Use Group Present R.3 Proposed _____
Constr. Class Present _____ Proposed _____
No. of Stories _____
Height of Structure _____ Ft.
Area—Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Alteration \$ _____
3. Total (1+2) \$ _____

Administrative Surcharge

Paid ☐ Check # _____ Minimum Fee \$ _____
Collected by: _____ DCA TRAINING FEE \$ _____
TOTAL FEE \$ _____

BLOCK 326 LOT 14 QUALIFICATION CODE _____ ADDRESS (SITE) 973 Rosewood Ave PERMIT NO. 08-1205



CONSTRUCTION PERMIT APPLICATION

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

C08-001763

I. IDENTIFICATION

1. Proposed Work Site at: 973 Rosewood Ave
2. Name of Owner in Fee: Ruth H. H. H. Tel. [REDACTED]
Address 973 Rosewood Ave Bonita 08723
street municipality zip code
3. Ownership in Fee: Public ☒ Private ☒
4. Principal Contractor: Dennis Hala Tel. (32) 458-0783
Address 1109 Industrial Pkwy Bonita
License No. OR, if new home, Builder Reg. No. 30305 Exp. Date _____
Federal Employee No. 31-1753023 FAX: (32) 458-7729
5. Architect or Engineer _____ Tel. (____) _____
Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun Dennis Hala
Tel. (32) 458-0783 FAX: (32) 458-7729

TAKE OFF EXISTING ROOF & REPLACING

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ 204 ✓		
2. Electrical	40 ✓		
3. Plumbing			
4. Fire Protection	45 ✓		
5. Elevator Devices			
6. Subtotal	\$		
7. Less 20% for State Plan Review			
8. Subtotal	\$		
9. State Permit Surcharge Fee	12		
10. Subtotal	\$		
11. Cert. of Occupancy	35		
12. Other 2P			
13. TOTAL	\$ 306 -		

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

- ☐ Minor Work
- ☐ New Building
- ☐ Addition
- ☐ a. Repair
☐ b. Alteration
☒ c. Renovation
☐ d. Reconstruction
- ☐ Fire Protection
- ☐ Plumbing
- ☒ Electrical
- ☐ Elevator Devices
- ☐ Asbestos Abat. Subch. B
- ☐ Lead Hazard Abatement
- ☐ Demolition

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
				4/18/08				
8520								
1000				4/20/08				
		4/14	4/14	4/14				
8500								
TOTAL COSTS								

III. DO YOU WANT: (optional)

- ☐ Partial Releases
- ☐ Prototype Processing

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

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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

- State Specific Use:
- Use Group:
- Change in Use Group, Indicate Former:
- No. of dwelling units: All Units ☒ Income-restricted ☐
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

- State Specific Use:
- Use Group:
- Change in Use Group, Indicate Former:

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

B. ☒ I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.vii:

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

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

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

I further certify that I will perform the following work:

C.3. ☒ Electrical C.4. () Plumbing

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

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

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

Signature *Dennis HACA* Date 4/21/08

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

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

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

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

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

☒ Check if contractor.

Agent Name Dennis HACA

Address 11296 Industrial Parkway, Brick NJ

Telephone 732-458-0993

Signature *DH*

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

IMPORTANT
A.H.B.T. - EXEMPT



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 04/19/2010
Control Number C-08-001763
Permit Number 08-1205
Permit Issue Date 05/02/2008
Certificate Number 08-1205

Certificate

Construction Code Division
(Certificate of Occupancy)

Identification

Work Site Location: 973 ROSEWOOD AVE. Brick Township, NJ Block: 525 Lot: 14 Qual: _____
Owner in Fee: HELFREY, KATHRYN & ARASZ, PAUL
Owner Address: 973 ROSEWOOD AVE BRICK NJ 08723
Telephone: [REDACTED]
Contractor DENNIS HALA
Address 775 FRANCIS DRIVE TOMS RIVER NJ 08753
Telephone: (732) 608-7960 Fax: (732) 608-7952
License Number or Builders Registration Number: 13VH00304400 30302 Federal Emp. Number: 31-1753623

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: ELECTRICAL ALTERATIONS, NEW ROOF REMOVE FLAT ROOF OVER EXISTING FAMILY ROOM AND
INSTALL NEW GABEL ROOF. ELECTRICAL ALTERATIONS AND NEW SMOKES.

Certificate Comments: _____

☒ Certificate of Occupancy

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

☐ Certificate of Approval

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

☐ Certificate of Continued Occupancy

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

☐ Temporary Certificate of Compliance

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

☐ Certificate of Clearance - Lead Abatement 5:17

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

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

☐ Certificate of Clearance - Asbestos Abatement

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

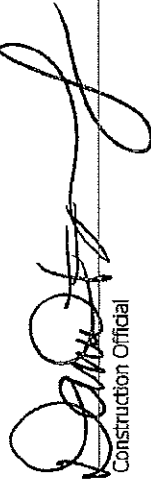
- ☐ Total removal of asbestos hazards in scope of work
☐ Partial or limited time period (_____ years); see file

☐ Certificate of Compliance

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

☐ Temporary Certificate of Occupancy

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


Construction Official

Fee: \$35.00

Check Number: 1821

Collected By: Stephanie Capozzi



CONSTRUCTION PERMIT

Date Issued 05/02/2008
Control # C-08-001763
Permit # 08-1205

IDENTIFICATION Block: 526 Lot: 14 Qualifier
Work Site Location: 973 ROSEWOOD AVE. Brick Township, NJ Contractor DENNIS HALA
Address 1129 E INDUSTRIAL PKWY BRICK NJ 08724
Owner in Fee HELFREY, KATHRYN & ARASZ, PAUL
973 ROSEWOOD AVE BRICK NJ 08723 Telephone: 732-458-0993
Lic. No. or Bldrs. Reg. No. 13VH00304400
Federal Employee No. 31-1753623

I am hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:

ELECTRICAL ALTERATIONS. NEW ROOF REMOVE FLAT ROOF OVER EXISTING FAMILY ROOM AND INSTALL NEW GABLE ROOF. ELECTRICAL ALTERATIONS AND NEW SMOKES.

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 \$9,550

Construction Official _____ Date _____

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

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

PAYMENTS (Office Use Only)	
Building	\$204
Electrical	\$40
Plumbing	\$0
Fire Protection	\$45
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$12
CO Fee	\$35.00
Other	\$30
Total	\$366
Check No.	1821
Cash	\$0
Credit	\$0
Collected By	Stephanie Capozzi

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:

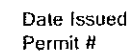
1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, 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 NUAC 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.



5/2/08
08-1205

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

Block 526 Lot 14 Qualification Code _____
Work Site Location 973 Rosewood Ave
Brick → 08723
Owner in Fee: Kathy Helfrey

Address 973 Rosewood ave Brick 087

Contractor: Kathy Helfrey Tel. 732-262-2711
Address: 973 Rosewood Ave. Bordentown, NJ 08123

Contractor License No. _____ Exp. Date _____
Federal Employee No. _____ FAX: (____) _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____
☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____
 Building Occupied as _____ Utility Co. _____
 Est. Cost of Elec. Work \$ 1000.

JOB SUMMARY (Office Use Only)

PLAN REVIEW		INSPECTIONS		Dates (Month/Day)			
Date	Initial	Type:	Failure	Failure	Approval	Initial	
☒ No Plans Required		Rough	7/10/08		7/24/08		
Joint Plan Review Required:		Barrier-Free					
☐ Building	☐ Plumbing	Trench					
☐ Fire	☐ Elevator	Temp. Serv.					
☒ Elec. Plans Approved		Constr. Serv.					
Date:	4/24/08	TCO					
Approved by:	[Signature]	Other					
		Service					
		Final	2-26-08	3/6/10	4/13/10	DS	
		Barrier-Free	2008	2/10			

SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA
 Date: 4-16-10
 Approved by: [Signature]

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

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Elec. Contractor ☐ Certif'd Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
51		Lighting Fixtures
		Receptacles
1		Switches
2		Detectors
		Light Poles
		Motors-Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel

TOTAL NUMBERS :

Pool Permit/with UW Lights
Storable Pool/Spa/Hot Tub
KW Elec. Range/Receptacle
KW Oven/Surface Unit
KW Elec. Water Heater
KW Elec. Dryer/Receptacle
KW Dishwasher
HP Garbage Disposal
KW Central A/C Unit
HP/KW Space Heater/Air Handler
KW Baseboard Heat
HP Motors 1/+ HP
KW Transformer/Generator
AMP Service
AMP Subpanels
AMP Motor Control Center
KW Elec. Sign/Outline Light

FEE (Office Use Only)

\$_____

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

7108



FIRE PROTECTION SUBCODE TECHNICAL SECTION

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

Block 526 Lot 14 Qualification Code _____

Work Site Location 973 Rosewood Ave.

BRICK, NJ 08723

Owner in Fee Karen Heltrey

Address 973 Rosewood

[REDACTED]

Contractor Oermus Hala Const. Inc.

Address 1129 Industrial Hwy #E

Tel (732) 458-0993 FAX (732) 458-7729

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

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

Fire Alarm Contractor No. _____

Federal Emp. No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____ Fire Alarm System: ☐ New OR ☐ Existing

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

Heating System: ☐ New OR ☐ Existing ☐ HVAC Fire Suppression/Standpipe System:

Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar ☐ New OR ☐ Existing

☐ Other _____ Location of Main Control Valve: _____

Location: _____

Fuel Storage Tank:

Fuel Type: ☐ Flammable OR ☐ Combustible Capacity _____

Total Cost of Fire Protection Work \$ 50.00

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Approval	Initial
☐ No Plans Required		Alarm System	_____	3870	AB
Joint Plan Review Required:		Suppression Sys.	_____	_____	_____
☐ Building ☐ Plumbing		Standpipe	_____	_____	_____
☐ Electric ☐ Elevator		Fire Pump	_____	_____	_____
☒ Fire Plans Approved		Pre-Eng. System	_____	_____	_____
Date: <u>5-2-08</u>		Mechanical	_____	_____	_____
Approved by: <u>[Signature]</u>		Smoke Control	_____	_____	_____
SUBCODE APPROVAL		TCO	_____	_____	_____
☐ CO ☐ CCO <u>CA</u>		Flam/Combust Tanks	_____	_____	_____
Date: <u>5-2-08</u>		Fireplace Venting	7/1/07	7/1/05	13610
Approved by: <u>[Signature]</u>		Final	_____	_____	_____
		Other	_____	_____	_____



Date Received

Control #

Date Issued

Permit #

5/2/08
08-1205

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Signature

☐ Certified Contractor

☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks	_____	_____
Alarm Systems	_____	_____
☐ System	_____	_____
☐ 110v Interconnected	_____	_____
☐ CO Detectors/110v	_____	_____
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	2	_____
Supervisory Devices (i.e., tampers, low/high air)	_____	_____
Signaling Devices (i.e., horn/strobes, bells)	_____	_____
Other Devices	_____	_____
TOTAL	_____	_____
Suppression Systems	_____	_____
Fire Pump _____ GPM Type _____	_____	_____
Dry Pipe/Alarm Valves	_____	_____
Pre-action Valves	_____	_____
Sprinkler Heads (Dry and Wet)	_____	_____
Standpipes	_____	_____
Pre-engineered Systems	_____	_____
Wet Chemical	_____	_____
Dry Chemical	_____	_____
CO ₂ Suppression	_____	_____
Foam Suppression	_____	_____
FM200 Suppression	_____	_____
Other _____	_____	_____
Other Systems	_____	_____
Kitchen Hood Exhaust System	_____	_____
Smoke Control System	_____	_____
Fired Appliances ☐ Gas or ☐ Oil	_____	_____
Fireplace Venting/Metal Chimney	_____	_____
Other	_____	_____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

To: Fire Inspector
From: Kathryn Helfrey
Re: 973 Rosewood Avenue

Dear Sir

Please note that the fire system in the addition will be interconnected to the existing system which is wired throughout the house.

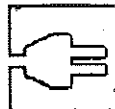
Please let me know if you need any other info.

Thanks!

Kathy



ELECTRICAL SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

5/2/18
18-215

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

Block 526 Lot 14 Qualification Code _____

Work Site Location 973 Rosewood Ave

Block 526 Lot 14

Owner in Fee: Kathy Helley

Tel. [REDACTED] e-mail _____

Address 973 Rosewood Ave. Block 526

street municipality zip code

Contractor: Kathy Helley Tel. (732) 242-2773

Address 973 Rosewood Ave. Block 526

street municipality zip code

Contractor License No. _____ Exp. Date _____

Federal Employee No. [REDACTED] FAX: (____)

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 0.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW		Date	Initial	INSPECTIONS		Dates (Month/Day)	
[] No Plans Required				Type:	Failure	Failure	Approval
				Rough			
				Barrier-Free			
Joint Plan Review Required:				Trench			
[] Building [] Plumbing				Temp. Serv.			
[] Fire [] Elevator				Constr. Serv.			
☒ Elec. Plans Approved				TCO			
Date: <u>4/2/18</u>				Other			
Approved by: <u>[Signature]</u>				Service			
				Final			
				Barrier-Free			
SUBCODE APPROVAL				Temp. Cut-in-Card Date Issued _____			
[] CO [] CCO [] CA				Final Cut-in-Card Date Issued _____			
Date: _____				Annual Pool Inspection _____			
Approved by: _____				Date of Grounding and Bonding Certification _____			

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature
Kathy Helley

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

D. TECHNICAL SITE DATA

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

TOTAL NUMBERS

	Pool Permit/with UW Lights
	Storable Pool/Spa/Hot Tub
	KW Elec. Range/Receptacle
	KW Oven/Surface Unit
	KW Elec. Water Heater
	KW Elec. Dryer/Receptacle
	KW Dishwasher
	HP Garbage Disposal
	KW Central A/C Unit
	HP/KW Space Heater/Air Handler
	KW Baseboard Heat
	HP Motors 1/+ HP
	KW Transformer/Generator
	AMP Service
	AMP Subpanels
	AMP Motor Control Center
	KW Elec. Sign/Outline Light

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

U.C.C. F120 (rev. 05/05) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

Reorder from OCS Printing (609) 398-4375



ELECTRICAL SUBCODE TECHNICAL SECTION



Date Received

Control #

Date Issued

Permit #

5/2/19
19-215

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

Block 5026 Lot 111 Qualification Code _____Work Site Location 973 P. Schmitt Ave.OS 723Owner in Fee: Kenneth + PatriciaTel. [REDACTED] e-mail _____Address 973 P. Schmitt Ave. Brick NJ 0723

street municipality zip code

Contractor: Ken + Patricia Tel. (732) 242-2712Address 973 P. Schmitt Ave. Brick NJ 0723 e-mail _____Contractor License No. [REDACTED] Exp. Date _____Federal Employee No. [REDACTED] FAX: () _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)			
☐ No Plans Required			Type:	Failure	Failure	Approval	Initial
			Rough				
			Barrier-Free				
Joint Plan Review Required:			Trench				
☐ Building ☐ Plumbing			Temp. Serv.				
☐ Fire ☐ Elevator			Constr. Serv.				
☒ Elec. Plans Approved			TCO				
Date: <u>11/2/18</u>			Other				
Approved by: _____			Service				
			Final				
			Barrier-Free				
SUBCODE APPROVAL			Temp. Cut-in-Card Date Issued				
☐ CO ☐ CCO ☐ CA			Final Cut-in-Card Date Issued				
Date: _____			Annual Pool Inspection				
Approved by: _____			Date of Grounding and Bonding Certification				

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Elec. Contractor ☐ Certif'd Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS
		Lighting Fixtures
		Receptacles
		Switches
		Detectors
		Light Poles
		Motors-Fract. HP
		Emergency & Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
		TOTAL NUMBERS
		Pool Permit/with UW Lights
		Storable Pool/Spa/Hot Tub
		KW Elec. Range/Receptacle
		KW Oven/Surface Unit
		KW Elec. Water Heater
		KW Elec. Dryer/Receptacle
		KW Dishwasher
		HP Garbage Disposal
		KW Central A/C Unit
		HP/KW Space Heater/Air Handler
		KW Baseboard Heat
		HP Motors 1/+ HP
		KW Transformer/Generator
		AMP Service
		AMP Subpanels
		AMP Motor Control Center
		KW Elec. Sign/Outline Light

FEE (Office Use Only)

\$ _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

CONTROL NUMBER 001763TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESSADDRESS OF APPLICATION: 973 Rosewood AveDATE REVIEWED: 4/25/08REVIEWED BY: RJOCONTACT CALLED/FAXED: [REDACTED] spoke to Kathy

Need letter that existing fan coil room SO will
be re-installed electric fan connected to rest of residence

Bldg

Elect

Fire

Plumbing

(Please mark subcode)

CONTROL NUMBER 00 1763

TOWNSHIP OF BRICK
APPLICATION REVIEW PROCESS

Resubmit
4/28/08
SK

ADDRESS OF APPLICATION: 973 Rosewood

DATE REVIEWED: 4-23-08

REVIEWED BY: FM

CONTACT CALLED/FAXED: [REDACTED] @ 8:00 spoke to H.O.

No collar ties shown on cross section

[Handwritten signature]



BUILDING SUBCODE TECHNICAL SECTION



Date Received 04/21/2008
Control # C-08-001763
Date Issued 4.21.08
Permit # 178-1265

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

Block 526 Lot 14 Qualification Code _____

Work Site Location: 973 ROSEWOOD AVE. Brick Township, NJ

Owner in Fee: HELFREY, KATHRYN & ARASZ, PAUL

Address 973 ROSEWOOD AVE BRICK NJ 08723

Tel. [REDACTED]

Contractor: DENNIS HALA

Address 1129 E INDUSTRIAL PKWY BRICK NJ 08724

Tel. 732-458-0993 Fax. 732-458-7729

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

Federal Employee No. 31-1753623

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

☐ No Plan Required

☒ All 4/23/08 [Signature]

☐ Footing

☐ Foundation

☐ Frame

☐ Other

Joint Plan Review Required

☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator

SUBCODE APPROVAL

☐ CO ☐ CCO ☐ CA

Date: _____

Approved by: _____

INSPECTIONS

Type: Failure Failure Approval Initial

Footing _____

Footing Bonding _____

Foundation _____

Slab _____

Frame _____

Truss Sys./Bracing _____

Barrier-Free _____

Insulation _____

Finishes-Base Layer _____

Finishes-Final _____

Energy _____

Mechanical _____

TCO _____

Other _____

Final _____

Barrier-Free _____

C. CERTIFICATION IN LIEU OF OATH

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

Signature _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

ELECTRICAL ALTERATIONS, NEW ROOF, REMOVE FLAT ROOF OVER EXISTING FAMILY ROOM AND INSTALL NEW GABEL ROOF. ELECTRICAL ALTERATIONS AND NEW SMOKES.

TYPE OF WORK

☐ New Building

☐ Addition

☒ Rehabilitation

☐ Roofing

☐ Siding

☐ Fence _____ Height (exceeds 6')

☐ Sign _____ Sq. Ft.

☐ Pool

☐ Asbestos Abatement Subchapter 8

☐ Lead Haz Abatement NJAC 5:17

☐ Other _____

☐ Demolition

FEE (Office Use Only)

_____ \$0

_____ \$0

_____ \$204

_____ \$0

_____ \$0

_____ \$0

_____ \$0

_____ \$0

_____ \$0

_____ \$0

_____ \$0

_____ \$0

Administrative Surcharge _____ \$0

Minimum Fee _____ \$0

State Permit Surcharge Fee _____ \$11

TOTAL FEE _____ \$215

B. BUILDING CHARACTERISTICS

Use Group Present 0 Proposed R-5

Constr. Class Present 0 Proposed 0

Number of Stories 1

Height of Structure 15 Ft.

Area - Largest Floor 1000 Sq. Ft.

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

Volume of New Structure 960 Cu. Ft.

Total Land Area Disturbed _____ Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. \$0

2. Rehabilitation \$8,500

3. Total (1+2) \$8,500



BUILDING SUBCODE TECHNICAL SECTION



Date Received 04/21/2008
Control # C-08-001763
Date Issued _____
Permit # _____

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

Block 526 Lot 14 Qualification Code _____

Work Site Location: 973 ROSEWOOD AVE. Brick Township, NJ

Owner in Fee: HELFREY, KATHRYN & ARASZ, PAUL

Address 973 ROSEWOOD AVE BRICK NJ 08723

Tel. [REDACTED]

Contractor: DENNIS HALA

Address 1129 E INDUSTRIAL PKWY BRICK NJ 08724

Tel. 732-458-0993 Fax: 732-458-7729

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

Federal Employee No. 31-1753623

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
☐ No Plan Required		
☒ All	<u>4/21/08</u>	<u>DH</u>
☐ Footing		
☐ Foundation		
☐ Frame		
☐ Other		
Joint Plan Review Required		
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator		
SUBCODE APPROVAL		
☐ CO ☐ CCO ☐ CA		
Date:		
Approved by:		

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

B. BUILDING CHARACTERISTICS

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

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

Number of Stories 1 2. Rehabilitation \$8,500

Height of Structure 15 Ft. 3. Total (1+2) \$8,500

Area - Largest Floor 1000 Sq. Ft.

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

Volume of New Structure 960 Cu. Ft.

Total Land Area Disturbed _____ Sq. Ft.

C. CERTIFICATION IN LIEU OF OATH

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

Signature _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

ELECTRICAL ALTERATIONS, NEW ROOF, REMOVE FLAT ROOF OVER EXISTING FAMILY ROOM AND INSTALL NEW GABLE ROOF. ELECTRICAL ALTERATIONS AND NEW SMOKES.

TYPE OF WORK

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

FEE (Office Use Only)

_____ \$0

_____ \$0

_____ \$204

_____ \$0

_____ \$0

_____ \$0

_____ \$0

_____ \$0

_____ \$0

_____ \$0

_____ \$0

_____ \$0

_____ \$0

Administrative Surcharge _____ \$0

Minimum Fee _____ \$0

State Permit Surcharge Fee _____ \$11

TOTAL FEE _____ \$215



FIRE PROTECTION SUBCODE TECHNICAL SECTION

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

Block 526 Lot 14 Qualification Code _____

Work Site Location 172 BL PULLEY VL

Owner in Fee KIRK & SISTER

Address 973 Rosawood

Tel [REDACTED]

Contractor Dennis Hala Const. Inc.

Address 1129 Industrial Pkwy. #E

Tel (732) 458-0993 FAX (732) 458-7729

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

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

Fire Alarm Contractor No. _____

Federal Emp. No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____ Fire Alarm System: ☐ New OR ☐ Existing

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

Heating System: ☐ New OR ☐ Existing ☐ HVAC Fire Suppression/Standpipe System: _____

Type: ☐ Gas ☐ Oil ☐ Electric ☐ Solar ☐ New OR ☐ Existing

☐ Other _____ Location of Main Control Valve: _____

Location: _____

Fuel Storage Tank:

Fuel Type: ☐ Flammable OR ☐ Combustible Capacity _____

Total Cost of Fire Protection Work \$ 50.00

C. CERTIFICATION IN LIEU OF OATH

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

☐ Certified Contractor ☐ Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

Flammable/Combustible Tanks _____

Alarm Systems _____

☐ System _____

☐ 110v Interconnected _____

☐ CO Detectors/110v _____

Alarm Devices (i.e., smoke, heat, pulls, water/flow) 2

Supervisory Devices (i.e., tampers, low/high air) _____

Signaling Devices (i.e., horn/strobes, bells) _____

Other Devices _____

TOTAL _____

Suppression Systems _____

Fire Pump _____ GPM Type _____

Dry Pipe/Alarm Valves _____

Pre-action Valves _____

Sprinkler Heads (Dry and Wet) _____

Standpipes _____

Pre-engineered Systems _____

Wet Chemical _____

Dry Chemical _____

CO₂ Suppression _____

Foam Suppression _____

FM200 Suppression _____

Other _____

Other Systems _____

Kitchen Hood Exhaust System _____

Smoke Control System _____

Fired Appliances ☐ Gas OR ☐ Oil _____

Fireplace Venting/Metal Chimney _____

Other _____

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

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

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.



FIRE PROTECTION SUBCODE TECHNICAL SECTION

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

Block _____ Lot _____ Qualification Code _____

Work Site Location _____

Owner in Fee _____

Address _____

Tel _____

Contractor _____

Address _____

Tel (732) 458-0773 FAX (732) 458-7729

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

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

Fire Alarm Contractor No. _____

Federal Emp. No. _____

B. FIRE PROTECTION CHARACTERISTICS

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

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

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

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

[] Other _____ Location of Main Control Valve: _____

Location: _____

Fuel Storage Tank:

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

Total Cost of Fire Protection Work \$ _____

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



Date Received

Control #

Date Issued

Permit #

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Signature

[] Certified Contractor

[] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks	_____	_____
Alarm Systems	_____	_____
[] System	_____	_____
[] 110v Interconnected	_____	_____
[] CO Detectors/110v	_____	_____
Alarm Devices (i.e., smoke, heat, pulls, water/flow)	_____	_____
Supervisory Devices (i.e., tampers, low/high air)	_____	_____
Signaling Devices (i.e., horn/strobes, bells)	_____	_____
Other Devices	_____	_____
TOTAL	_____	_____
Suppression Systems	_____	_____
Fire Pump _____ GPM Type _____	_____	_____
Dry Pipe/Alarm Valves	_____	_____
Pre-action Valves	_____	_____
Sprinkler Heads (Dry and Wet)	_____	_____
Standpipes	_____	_____
Pre-engineered Systems	_____	_____
Wet Chemical	_____	_____
Dry Chemical	_____	_____
CO ₂ Suppression	_____	_____
Foam Suppression	_____	_____
FM200 Suppression	_____	_____
Other	_____	_____
Other Systems	_____	_____
Kitchen Hood Exhaust System	_____	_____
Smoke Control System	_____	_____
Fired Appliances [] Gas or [] Oil	_____	_____
Fireplace Venting/Metal Chimney	_____	_____
Other	_____	_____

Administrative Surcharge \$ _____

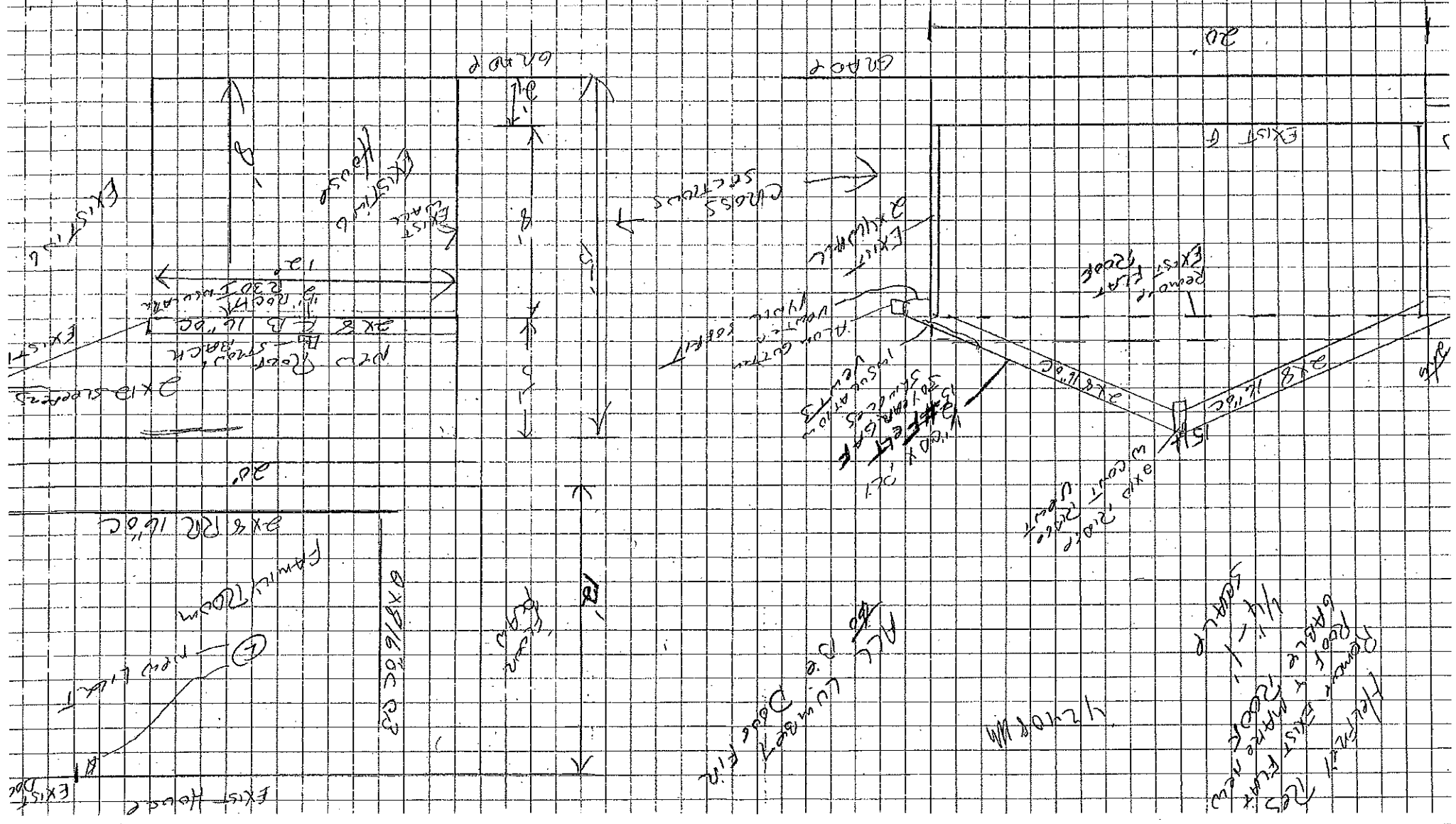
Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

Handwritten signature

APPROVED FOR ZONING OFFICER
SEAN KINNEY
APR 21 2003



osewood Ave 725
26 Lot 14 1 FLAT 1 NEW

Ave
+
1/2 fruit
Remove
Roof
TABLE
FLAT
EXIST FLAT
+ MAKE NEW
ROOF
1' -
1' -
SCALE

ALL ~~the~~ Die Lumber Dows Find

[illegible]

new light

FAMILY ROOM

2x8 R/R 16" o.c.

[illegible]

Hand-drawn site plan on grid paper showing a proposed addition to an existing house. The existing house is a rectangle with a 12' x 15' footprint. The addition is a 2x8' room with a 16' x 10' porch. The addition is located to the right of the existing house. The plan includes dimensions, room labels, and orientation markers.

Labels and dimensions on the plan:

- NEW ROOM 2x8'
- 15' PORCH
- 16' x 10' PORCH
- 2x12 SLEEP
- EXIST. WALL
- EXIST. HOUSE
- EXIST. (on the right)
- 12' (width of existing house)
- 15' (length of existing house)
- 16' (length of porch)
- 10' (width of porch)
- 2x8' (width of new room)
- 2x12 SLEEP (length of new room)

**SHEATHING INSPECTION REQUIRED
SEE A.W.C. DETAILS ATTACHED
FRAMING CHECKLIST MUST BE SIGNED**

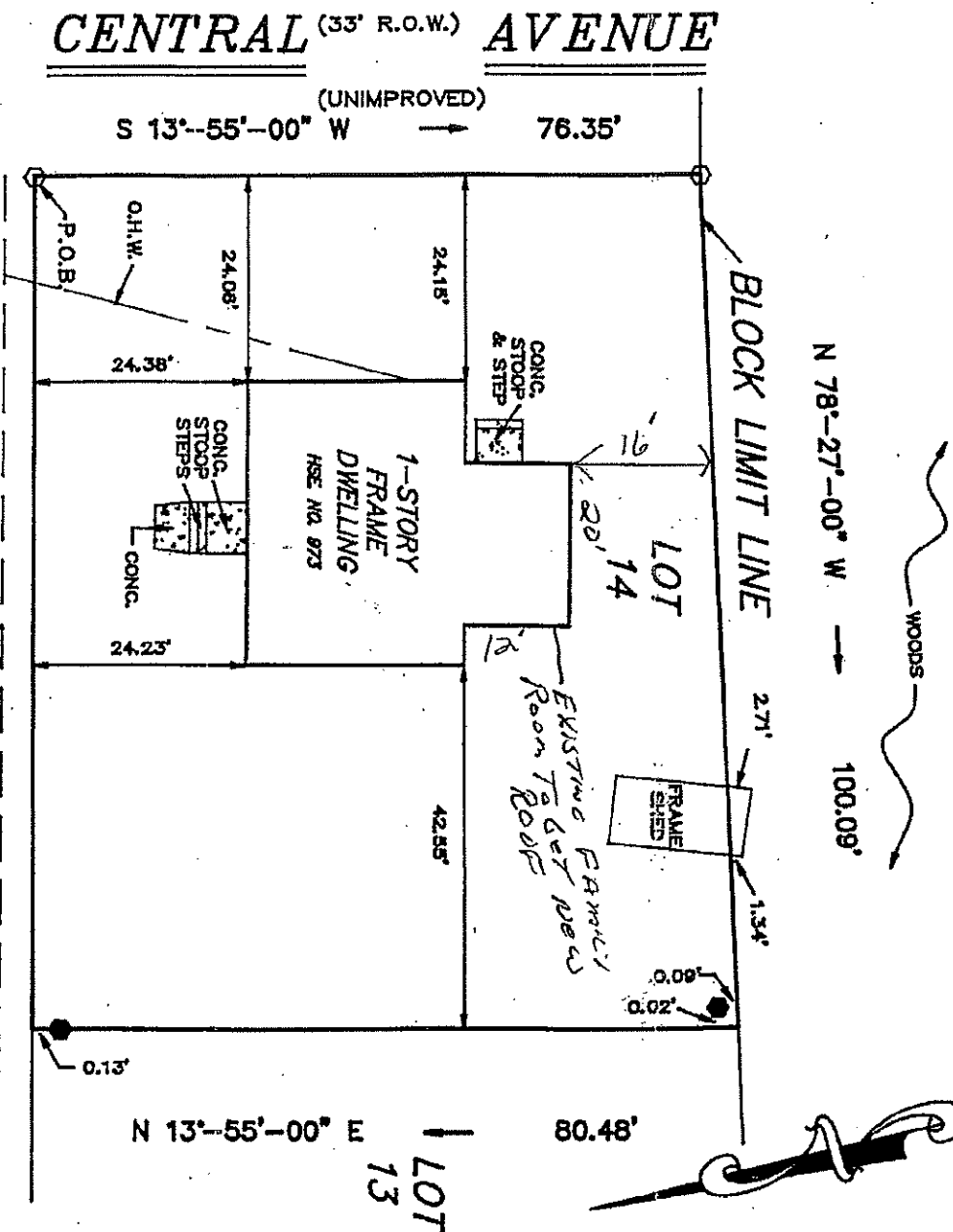
Release of these prints by the building department constitutes general approval only, and does not relieve the owner, contractor, architect or engineer of sole responsibility for full construction code compliance as per (N.J.S.C. chapter 23 title 5) further, it shall be the contractor's responsibility to establish and conform to workmanlike standards, acceptable to the building department.

Stephen J. Helkey
sed 4/28/08

1. IF ANY PORTION OF THIS PROPERTY IS CLAIMED BY THE STATE OF N.J. AS TIDE LANDS.
2. DEED REFERENCE: BOOK 4108, PAGE 788
3. ENVIRONMENTALLY SENSITIVE AREAS ARE NOT LOCATED BY THIS SURVEY. THIS SURVEY IS SUBJECT TO CONDITIONS WHICH AN ACCURATE TITLE SEARCH MIGHT DISCLOSE.

LOT
23.04

FILED MAP REF.



ROSEWOOD (33' R.O.W.) **AVENUE**

- LEGEND**
- -- REBAR SET
 - -- REBAR FOUND

CERTIFICATION:

IN CONSIDERATION OF FEE PAID I HEREBY CERTIFY THIS SURVEY WAS MADE UNDER MY IMMEDIATE SUPERVISION TO:

KATHRYN HELFREY AND PAUL ARASZ

NETWORK TITLE SERVICES, INC. / LAWYERS TITLE INSURANCE CORPORATION

AMY ALKOFF CHASIN, ESQ.

AMERICAN FEDERAL

Map of Survey

LOT 14, BLOCK 526, TAX MAP, (SHEET NO. 35.04)
BRICK TOWNSHIP -- OCEAN COUNTY -- NEW JERSEY

A.K.A. LOTS 13, 14, 15 & 16, BLOCK 21, AS SHOWN ON A MAP ENTITLED "CEDARWOOD PARK, SUBDIVISION C-ANNEX, OCEAN CO., NEW JERSEY," FILED APRIL 7, 1942, AS MAP NO. B-315.

DELCO Land Surveying Corp.
109 West Island Road
Bayville, N.J. 08721

SCALE	DATE
1" = 20'	7/28/00
DRAWN BY	SHEET



BUILDING SUBCODE TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

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

Block 506 Lot 14 Qualification Code _____
 Work Site Location 973 Rosewood Ave
Brick NJ 08723
 Owner in Fee: Kathy Heitrey
 Tel. [REDACTED]
 Address 973 Rosewood Ave Brick 08723
 Contractor: Dennis Hala Tel. 730, 458-0993
 Address 1129 Industrial Pkwy Bldg 3 Fax Brick NJ 08724
 Contractor License No. or Builder Registration No. 30302 Exp. Date _____
 Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
 Federal Emp. ID No. 31-1753023 FAX: 730, 458-7729

C. CERTIFICATION IN LIEU OF OATH

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

Signature _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

FLAT
REMOVE ROOF OVER EXISTING
FAMILY ROOM & IN INSTALL
NEW GABLE ROOF

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☐ No Plans Required	_____	_____	Type: _____	Failure Approval Initial
☐ All	_____	_____	Footling	_____
☐ Footling	_____	_____	Footling Bonding	_____
☐ Foundation	_____	_____	Foundation	_____
☐ Frame	_____	_____	Slab	_____
☐ Other	_____	_____	Frame	_____
			Truss Sys./Bracing	_____
			Barrier-Free	_____
Joint Plan Review Required:			Insulation	_____
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Finishes -Base Layer	_____
			Finishes -Final	_____
SUBCODE APPROVAL			Energy	_____
☐ CO ☐ CCO ☐ CA			Mechanical	_____
Date: _____			TCO	_____
Approved by: _____			Other	_____
			Final	_____
			Barrier-Free	_____

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____ Est. Cost of Bldg. Work:
 Constr. Class Present _____ Proposed _____ 1. New Bldg. \$ _____
 No. of Stories 1 2. Rehabilitation \$ 8300
 Height of Structure 15 Ft. 3. Total (1+2) \$ 8300
 Area — Largest Floor 4000 Sq. Ft.
 New Bldg. Area/All Floors 0 Sq. Ft.
 Volume of New Structure 960 Cu. Ft.
 Total Land Area Disturbed 0 Sq. Ft.

TYPE OF WORK:

- ☐ New Building
☐ Addition
☒ Rehabilitation
☒ Roofing
☐ Siding
☐ Fence _____ Height (exceeds 6')
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Retaining Wall _____ Sq. Ft.
☐ Asbestos Abatement Subchapter B
☐ Lead Haz. Abatement NJAC 5:17
☐ Radon Remediation
☐ Other _____
☐ Demolition

FEE (Office Use Only)

\$ _____

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

U.C.C. F110
(rev. 01/09)

1 White = Inspector Copy
 3 Pink = Office Copy

2 Canary = Office Copy
 4 Gold = Applicant Copy

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

Stephen C. Acropolis, Mayor



Department of Engineering

Date: 4-21-08

**ENGINEERING
PLOT PLAN EXEMPT FORM**

Block: 526 Lot: 14

Property Address: 973 Rosewood Ave

I, Dennis HACA (name) of 1189 E INDUSTRIAL PARKWAY (address) BRICK N.J.

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

Applicant's Signature

The following shall be submitted with this request:

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

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

FOR OFFICE USE ONLY

Approved on: 4/22/08

Signed: NJS

Rejected on: _____

Signed: _____

Comments: N/A



Applicable to Ordinance 720-92

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

TOWNSHIP OF BRICK

Debris Form

Work Site Address: 973 Rosewood Ave

Block: 526 Lot: 14

Contractor: Dennis Hala

Contractor's Address: 1129 E INDUSTRIAL PARKWAY BRICK N.J.

Type of Construction (minor, new home): ADDITION

Type of Debris (shingles, siding, wood, etc.): Construction Debris

Party responsible for removal: H & D Rossetto

Dumpster size: 30 YARD

Destination of debris: OCEAN COUNTY LANDFILL

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

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

Signature

Dennis Hala

Print Name

Date

4-21-08

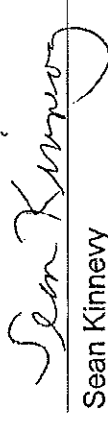
Township of Brick Zoning Permit

Approved:	Monday, April 21, 2008	Number:	2008-352
Block	526	Lot	14
		Zone:	R-7.5
Property Address:	973 Rosewood Avenue		
Applicant:	Dennis Hala; Construction by Dennis Hala		
Property Owner:	Kathryn Helfrey		
Existing Use:	Single Family Residential		
Proposed Use:	Single Family Residential		
Proposed Construction:	New roof on house, 15 high.		
Conditions:	An additional zoning permit is required for any additional work.		

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


Michael P. Fowler, MCP/PP

Principal Planner


Sean Kinnew

Zoning Officer

TOWNSHIP OF BRICK ZONING PERMIT APPLICATION

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

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

BLOCK 526

LOT 14 QUALIFIER

PROPERTY ADDRESS 973 Rosewood Ave

PERSONAL NAME OF APPLICANT Dennis Hala

BUSINESS NAME OF APPLICANT Construction By Dennis Hala

MAILING ADDRESS OF APPLICANT 1129 E Industrial Parkway Brick 08723

PROPERTY OWNER'S FULL NAME KATHRYN HELFERT

PRESENT USE OF PROPERTY (check all that apply)

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

PROPOSED USE OF PROPERTY (check all that apply)

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

PROPOSED CONSTRUCTION (check all that apply)

- ☐ New Building (please describe)
☒ Addition - Height new roof on existing house Height 15'
☐ Alteration
☐ Porch or deck - Height
☐ Shed - Height
☐ Fence - Type
☐ Swimming Pool ☐ in-ground ☐ above-ground
☐ Other (please describe)

CHECKLIST

- ☐ All information completed above
☒ Two (2) copies of a plot plan containing:
☒ All existing and proposed structures
☒ All dimensions of the lot and structures
☒ All setbacks from the structures to the property lines
☐ All adjacent streets and waterways

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

☐ If applicable, include a copy of the Zoning Board of Adjustment Resolution, the date that the map was signed, and/or the date that the subdivision map was filed with the Ocean County Clerk, along with the file map and number.

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

SIGNATURE OF APPLICANT [Signature]

Date 4-21-08

Reviewed by Zoning Office SK

Date 4/21/08 (X) Approved () Denied

March 2003

FOR ALL PERMITS AFFECTING A RESIDENTIAL STRUCTURE
(REGARDLESS IF A FIRE PERMIT IS REQUIRED) A MINIMUM OF 1 (ONE)
BATTERY OPERATED OR ELECTRIC SMOKE DETECTOR IS REQUIRED
ON EACH LEVEL AND IN THE VICINITY OF THE SLEEPING ROOMS. AS
OF APRIL 7, 2003 THE STATE OF NJ REQUIRES THE INSTALLATION OF
AT LEAST 1 (ONE) CARBON MONOXIDE DETECTOR IN THE VICINITY OF
ALL SLEEPING ROOMS. THIS APPLIES TO ALL DWELLING UNITS
CONTAINING A FUEL BURNING APPLIANCE OR ATTACHED GARAGE.

For work not requiring a fire inspection for fire alarms in accordance with the code,
homeowners or their agents (contractors) shall be required to confirm the
installation of these devices. This may be done by signing the below affidavit in lieu
of an inspection.

*****PLEASE READ AND SIGN*****

I hereby certify that a minimum of one smoke detector is installed and is operational on each level of this residential structure in the immediate
vicinity of the sleeping rooms. I further certify that a minimum of one carbon monoxide detector is installed and operational in the vicinity of the
sleeping rooms. Also, I understand that failure to install and maintain these devices in an operational condition is a violation of the New Jersey
Administrative Code 5:23 and may subject me to penalties as prescribed by law.

NAME: KATHY Helmer

SIGNATURE: Kathryn A. Helmer

DATE: 4-21-08

BLOCK: 526

LOT: 14

ADDRESS: 970 Rosewood Ave

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER WITH MULTICOLORED BACKGROUND AND MULTIPLE SECURITY FEATURES TO ENSURE AUTHENTICITY.

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs
HAS REGISTERED

Construction by Dennis Hala Inc
Dennis Hala
1129 Industrial Pkwy #E
Brick NJ 08724

FOR PRACTICE IN NEW JERSEY AS AN Home Improvement Contractor

11/02/2007 TO 12/31/2009
VALID

13VH00304400
LICENSE REGISTRATION CERTIFICATION #

James P. Hala
ACTING DIRECTOR

STATE OF NEW JERSEY
DEPARTMENT OF COMMUNITY AFFAIRS
Division of Codes and Standards
New Home Warranty Program
This is to certify that

CONSTRUCTION BY DENNIS HALA

is a registered builder under
the New Home Warranty and
Builder Registration Act
(N.J.S.A. 46:2B.1 et seq.)

(This registration expires on the date stamped)

William H. Chandy
Director

030302 JUN 30 08

REGISTERED BUILDER