BLOCK 446.05 LOT 3 QUALIFICATION CODE _____ ADDRESS (SITE) _____ PERMIT NO. 15-3188

CONSTRUCTION PERMIT APPLICATION

C-15-004327

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

COMMERCIAL

I. IDENTIFICATION

1. Proposed Work Site at: 580 Brick Boulevard, Brick, NJ 08723
2. Name of Owner in Fee: Lake Riviera Co. - Fast Tailoring
   Tel. (732) 773-3232 e-mail _____
   Address 580 (street) Brick Boulevard, (municipality) Brick, NJ (zip code) 08723
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: Aggressive Mechanical Tel. (732) 502-9300
   Address 1109 Sixth Ave. e-mail _____
   Neptune NJ 07753
   License No. OR, if new home, Builder Reg. No. 9025 Exp. Date 6/17
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. 22309 5886 FAX: (732) 502-9494
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. ( ) _____ FAX: ( ) _____
6. Responsible Person in Charge once Work has Begun WALLACE
   Tel. (732) 502 9300 FAX: (732) 502 9494

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$	100 ✓	
2. Electrical		100 ✓	
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee		6-	
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$	206-	

VI. BUILDING/SITE CHARACTERISTICS (office use only)

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

IIa. PROPOSED WORK

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

IIb. SUBCODES (Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building		Mauch							
☑ Electrical	1,000				9/4/15	ZD			
☑ Plumbing	2,000				9/10/15	[illegible]			
☐ Fire Protection									
☐ Elevator									
TOTAL COST	3000								

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 _____

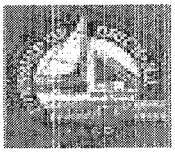
III. PLAN REVIEW (optional)

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

8-26-15



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 11/22/2016
Control Number C-15-004327
Permit Number 15-3183
Permit Issue Date 9/23/2015
Certificate Number 15-3188

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 550-580 BRICK BLVD. TENANT: FAST TAILORING Brick Township, NJ Block: 446.05 Lot: 3 Qual:

Owner in Fee: LAKE RIVIERA CO

Owner Address: 550 BRICK BLVD BRICK NJ 08723

Telephone: (732) 773-3232

Contractor AGGRESSIVE MECHANICAL CONTR INC

Address 1109 SIXTH AVENUE NEPTUNE NJ 07753-5149

Telephone: (732) 502-9300 Fax: (732) 502-9494

License Number or Builders Registration Number: 9025 13VH00989800 4539A Federal Emp. Number: 22-3095886

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: B Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: REPLACEMENT A/C ...TENANT: FAST TAILORING

Certificate Comments:

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

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

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

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

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

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

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

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

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

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

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 11/22/2016

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

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 _____ Date _____

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

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

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

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

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

(X) Check if contractor.

Agent Name Aggressive Mechanical Contractors

Address 1104 Sixth Ave.
Neptune NJ 07753

Telephone (732) 502-9300

Signature _____

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

PLUMBING SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 9/23/15
Control #
Date Issued
Permit # 15-3188

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

Block 446.05 Lot 3 Qualification Code ______

Work Site Location 580 Brick Boulevard
Brick, NJ 08723

Owner in Fee: Lake Riviera Co. – Fast Tailoring

Tel. (732) 773 3232 e-mail ______

Address 550

Contractor: Aggressive Mechanical Contractors (street / municipality / zip code) Tel. (732) 502-9300

Address 1109 Sixth Avenue e-mail ______
Neptune NJ 07753

Contractor License No. 9025 Exp. Date 6/17

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

Federal Emp. ID No. 22 309 5886 FAX: (732) 502-9494

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 $ 2,000.–

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL for PERMIT
Date: 9-10-18
Approved by: [signature]

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date: 11-22-16
Approved by: [signature]

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final	12-17-15		11-21-16	[initials]

Dates (Month/Day)

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here: [signature]

Print name here: WA Lloyd

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Replace (1) Rooftop Package Unit.

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 Condensate	

COMMERCIAL

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

U.C.C. F130 (rev. 11/09) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Hard = Applicant Copy

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 9/23/15
Control #
Date Issued
Permit # 15-3188

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

Block 446.05 Lot 3 Qualification Code
Work Site Location 580 Brick Boulevard
Brick, NJ 08723
Owner in Fee: Lake Riviera Co. - Fast Tailoring
Tel. (732) 773 3232 e-mail
Address 550 Brick Boulevard, Brick, NJ 08723
(street) (municipality) (zip code)
Contractor: Altec Electrical Corp. 732 (903-6264
Address 904 Atlantic Avenue e-mail jlawroski@altecbuildingsystems.com
Pt. Pleasant, NJ 08742
Contractor License No. 11073 Exp. Date
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH04948600
Federal Emp. ID No. 22-3292289 FAX: (732) 903-6298

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 1,000.-

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 and perform the work listed on this application.

Applicant sign/Contractor sign and seal here: X
Print name here: James E. Lawroski Jr.
[X] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Direct Replacement: (1) rooftop package unit

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	4	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	
X		4-Ton Rooftop Package Unit	

COMMERCIAL

JOB SUMMARY (Office Use Only)

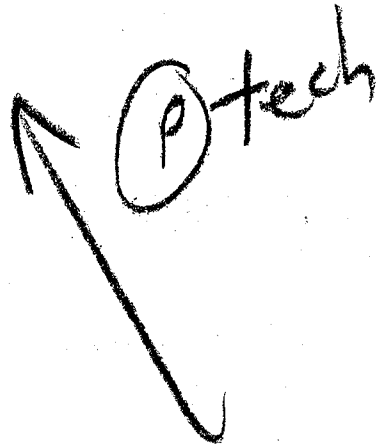
PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: 9/24 Approved by: CO
[ ] Electric Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: 9/24/15
Approved by:
SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [V] CA
Date: 11/21/16
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service Final	12-17-15		11/21/16 PD	
Barrier-Free				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued
Annual Pool Inspection
Date of Grounding and Bonding Certification

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

12-17-15 AD
No Access to RTU



12-17-15 RAIN NO ROOF ACCESS 10.45

(E) tech

9/14/15
fee u

CONSTRUCTION PERMIT

Date Issued 9/23/15
Control # C-15-004327
Permit # 15-3188

IDENTIFICATION Block: 446.05 Lot: 3 Qualifier
Work Site Location: 550-580 BRICK BLVD. TENANT: FAST TAILORING Brick Township, NJ
Owner in Fee LAKE RIVIERA CO
550 BRICK BLVD BRICK NJ 08723
Telephone: (732) 773-3232

Contractor AGGRESSIVE MECHANICAL CONTR INC
Address 1109 SIXTH AVENUE NEPTUNE NJ 07753-5149
Telephone: (732) 502-9300
Lic. No. or Bldrs. Reg. No. 4539A
Federal Employee. No. 22-3095886

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
REPLACEMENT A/C ...TENANT: FAST TAILORING

PAYMENTS (Office Use Only)

Building	$0
Electrical	$100
Plumbing	$100
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$6
CO Fee	
Other	$0
Total	$206
Check No.	5532
Cash	$0
Credit	$0
Collected By	

Note: If constuction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $3,000

David F. Newman Jr.
Construction Official

Date 9/14/15

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.

09/23/15 00155814466
SERV.006
$100.00
$100.00
$6.00
CHECK $206.00

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.

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER WITH A MULTI COLORED 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
Board of Exam. of Master Plumbers

HAS LICENSED

WILLIAM A. LLOYD
T/A AGGRESSIVE MECH CONTR INC
1109 6TH AVE
NEPTUNE NJ 07753-5149

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

05/08/2015 TO 06/30/2017
VALID

Signature of Licensee/Registrant/Certificate Holder

36BI00902500
LICENSE/REGISTRATION/CERTIFICATION #

ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Exam. of Master Plumbers
HAS LICENSED
WILLIAM A. LLOYD
Master Plumber

05/08/2015 TO 06/30/2017
VALID

SIGNATURE

36BI00902500
License/Registration/Certificate #

ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:
Board of Exam. of Master Plumbers
P.O. Box 45008
Newark, NJ 07101

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
Board of Exam. of HVACR Contractors

HAS LICENSED

WILLIAM A. LLOYD
1109 6TH AVE
NEPTUNE NJ 07753-5149

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

08/26/2014 TO 06/30/2016
VALID

WA Lloyd
Signature of Licensee/Registrant/Certificate Holder

19HC00087600
LICENSE/REGISTRATION/CERTIFICATION #

ACTING DIRECTOR

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
WILLIAM A. LLOYD
Master HVACR Contractor

08/26/2014 TO 06/30/2016
VALID

SIGNATURE

19HC00087600
License/Registration/Certificate #

ACTING DIRECTOR

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:
Board of Exam. of HVACR Contractors
P.O. Box 47031
Newark, NJ 07101

AGGRESSIVE MECHANICAL CONTRACTORS, INC.
"You Will Feel The Difference"
Heating - Cooling - Plumbing

NJ Master HVACR Contractors License #19HC00087600
NJ Home Improvement Contractor #13VH00989800
NJ Master Plumbing License #36B100902500

August 21, 2015

Brick Township
401 Chambersbridge Road
Brick, NJ 08723

RE: Fast Tailoring – 580 Brick Boulevard, Brick, NJ 08723

Dear Sir/Madam,

Enclosed you will find permits for the above referenced address. Please call my office with the amount due, so that a check may be forwarded. If you have any questions or require additional information to process these permits, please do not hesitate to contact me at 732-502-9300.

Thank you,

Jessica Kerrigan
Aggressive Mechanical Contractors

PACKAGED GAS / ELECTRIC

KG

Landmark® Rooftop Units

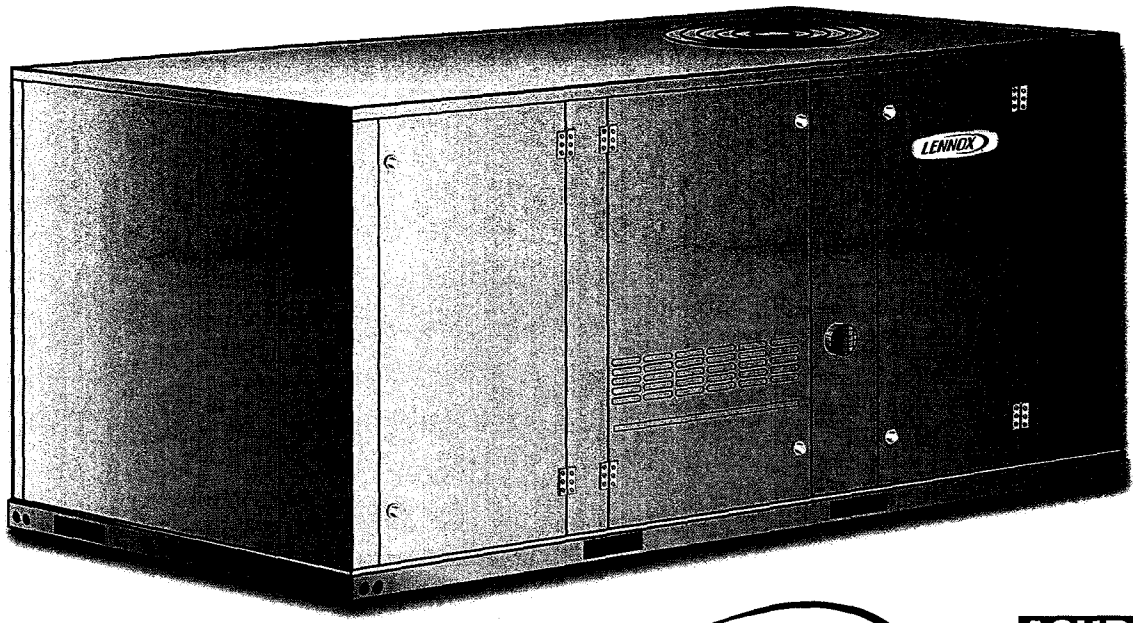
60 HZ

Bulletin No. 210726
July 2015
Supersedes January 2015

PRODUCT SPECIFICATIONS

LANDMARK®

Performance Marked by Flexibility™



L Connection® NETWORK

ASHRAE 90.1 COMPLIANT

2 to 7.5 Tons

Net Cooling Capacity – 24,200 to 90,000 Btuh

Gas Input Heat Capacity – 65,000 to 150,000 Btuh

MODEL NUMBER IDENTIFICATION

K G B 060 S 4 B S 1 Y

Brand/Family
K = Landmark® Product Line

Unit Type
G = Packaged Gas Heat w/ Electric Cooling

Major Design Sequence
A = 1st Generation
B = 2nd Generation

Nominal Cooling Capacity - Tons
024 = 2 Tons
030 = 2.5 Tons
036 = 3 Tons
048 = 4 Tons
060 = 5 Tons
072 = 6 Tons
090 = 7.5 Tons

Cooling Efficiency
S = Standard Efficiency

Refrigerant Type
4 = R-410A

Blower Type
D = Direct Drive
B = Belt Drive

Heating Type
S = Standard Gas Heat, 1 stage
M = Medium Gas Heat, 1 stage
H = High Gas Heat, 2 Stage
T = High Gas Heat, 1 Stage
U = Medium Gas Heat, 2 Stage
Q = Medium Gas Heat, 2 Stage, Low NOx
W = Standard Gas Heat, 1 Stage, Low NOx
Y = Medium Gas Heat, 1 Stage, Low NOx
X = High Gas Heat, 2 Stage, Low NOx
Z = High Gas Heat, 1 Stage, Low NOx

Minor Design Sequence
1 = 1st Revision
2 = 2nd Revision
3 = 3rd Revision

Voltage
P = 208/230V-1 phase-60hz
Y = 208/230V-3 phase-60hz
G = 460V-3 phase-60hz
J = 575V-3 phase-60hz

SPECIFICATIONS - BELT DRIVE BLOWER - KGB

3 - 5 TON

General Data	**Nominal Tonnage**	**3 Ton**	[redacted]	**5 Ton**
	Model No.	**KGB036S4B**	**KGB048S4B**	**KGB060S4B**
	Efficiency Type	**Standard**	**Standard**	**Standard**
Cooling Performance	Gross Cooling Capacity - Btuh	38,500	49,700	61,900
	[1] Net Cooling Capacity - Btuh	37,200	47,500	59,500
	AHRI Rated Air Flow - cfm	1140	1600	1760
	[2] Sound Rating Number (SRN) (dBA)	74	74	79
	Total Unit Power - kW	2.9	4.1	5
	[1] SEER (Btuh/Watt)	14.0	14.0	14.0
	[1] EER (Btuh/Watt)	12.5	11.5	11.8
Refrigerant	Type	R-410A	R-410A	R-410A
	Charge Furnished	5 lbs. 9 oz.	5 lbs. 6 oz.	6 lbs. 13 oz.
Gas Heating Options - See page 20		**Standard (1 stage) or Medium (1 or 2 stage)**	**Standard (1 stage), Medium (1 or 2 Stage) or High (1 or 2 Stage)**	
Compressor Type (one per unit)		Scroll	Scroll	Scroll
Outdoor Coil	Net face area - sq. ft.	14.5	14.5	17.8
	Number of rows	1	1	1
	Fins / inch	23	23	23
Outdoor Coil Fan	Motor HP	1/4	1/4	1/3
	Motor rpm	825	825	1075
	Total motor watts	250	250	370
	Diameter - in. / No. of blades	24 - 3	24 - 3	24 - 3
	Total air volume - cfm	3300	3300	4700
Indoor Coil	Net face area - sq. ft.	7.8	7.8	9.7
	Tube diameter - in.	3/8	3/8	3/8
	Number of rows	3	3	4
	Fins per inch	14	14	14
	Drain Connection (no.and size) - in.	(1) 1 NPT	(1) 1 NPT	(1) 1 NPT
	Expansion device type	Balanced Port Thermostatic Expansion Valve, removeable power head		
[3] **Indoor Blower & Drive Selection**	Nominal Motor HP 208/230V-1ph	1.5 hp	1.5 hp	1.5 hp
	Nominal Motor HP All others voltages	1 hp, 2 hp	1 hp, 2 hp	1 hp, 2 hp
	Maximum Usable Motor HP 208/230V-1ph	1.7 hp	1.7 hp	1.7 hp
	Maximum Usable Motor HP All other voltages	1.15 hp, 2.3 hp	1.15 hp, 2.3 hp	1.15 hp, 2.3 hp
	Available Drive Kits	A01 673 - 1010 rpm A05 897 - 1346 rpm	A02 745 - 1117 rpm A06 1071 - 1429 rpm	A03 833 - 1250 rpm A07 1212 - 1548 rpm
	Wheel nominal diameter x width - in.	10 x 10	10 x 10	10 x 10
Filters	Type	Disposable		
	Number and size - in.	(4) 16 x 20 x 2		(4) 20 x 20 x 2
Electrical Characteristics - 60 Hz		208/230V 1 phase 208/230V, 460V & 575V 3 phase	208/230V, 1 phase 208/230V 460V & 575V 3 phase	208/230V 1 phase 208/230V 460V & 575V 3 phase

NOTE - Net capacity includes evaporator blower motor heat deduction. Gross capacity does not include evaporator blower motor heat deduction.

[1] AHRI Certified to AHRI Standard 210/240: 95°F outdoor air temperature and 80°F db/67°F wb entering evaporator air; minimum external duct static pressure.

[2] Sound Rating Number (SRN) rated in accordance with test conditions included in ARI Standard 270-95.

[3] Using total air volume and system static pressure requirements determine from blower performance tables rpm and motor hp required. Maximum usable hp of motors furnished are shown. In Canada, nominal motor hp is also maximum usable motor hp output. If motors of comparable hp are used, be sure to keep within the service factor limitations outlined on the motor nameplate.

SPECIFICATIONS - BELT DRIVE BLOWER - KGA

3 - 7.5 TON

General Data	Nominal Tonnage	3 Ton	4 Ton	5 Ton	6 Ton	7.5 Ton
	Model No.	KGA036S4B	KGA048S4B	KGA060S4B	KGA072S4B	KGA090S4B
	Efficiency Type	Standard	Standard	Standard	Standard	Standard
Cooling Performance	Gross Cooling Capacity - Btuh	37,500	50,000	61,800	72,500	92,000
	Net Cooling Capacity - Btuh	[1] 36,000	[1] 48,000	[1] 59,000	[2] 69,000	[2] 90,000
	AHRI Rated Air Flow - cfm	1200	1600	1800	2450	2430
	[3] Sound Rating Number (SRN) (dBA)	75	75	82	79	79
	Total Unit Power - kW	3.4	4.4	5.3	6.1	8.2
	SEER (Btuh/Watt)	[1] 13.0	[1] 13.0	[1] 13.0	---	---
	IEER (Btuh/Watt)	---	---	---	[2] 12.3	[2] 11.2
	EER (Btuh/Watt)	[1] 10.7	[1] 11.0	[1] 11.2	[2] 11.2	[2] 11.0
Refrigerant	Type	R-410A	R-410A	R-410A	R-410A	R-410A
	Charge Furnished	8 lbs. 5 oz.	8 lbs. 10 oz.	11 lbs. 0 oz.	8 lbs. 12 oz.	8 lbs. 8 oz.
Gas Heating Options - See page 20		**Standard (1 stage) or Medium (1 or 2 stage)**	**Standard (1 stage), Medium (1 or 2 Stage) or High (1 or 2 Stage)**			**Medium (1 or 2 Stage) or High (1 or 2 Stage)**
Compressor Type (one per unit)		Scroll	Scroll	Scroll	Scroll	Scroll
Outdoor Coil	Net face area - sq. ft.	15.6	15.6	15.6	17.8	24.2
	Tube diameter - in.	3/8	3/8	3/8	---	---
	Number of rows	1	1.5	2	1	1
	Fins / inch	20	20	20	23	23
Outdoor Coil Fan	Motor HP	1/4	1/4	1/3	1/3	1/2
	Motor rpm	825	825	1075	1075	1075
	Total motor watts	250	250	370	370	520
	Diameter - in. / No. of blades	24 - 3	24 - 3	24 - 3	24 - 3	24 - 4
	Total air volume - cfm	3700	3500	4300	4700	5300
Indoor Coil	Net face area - sq. ft.	7.8	7.8	7.8	9.7	9.7
	Tube diameter - in.	3/8	3/8	3/8	3/8	3/8
	Number of rows	3	3	4	4	4
	Fins per inch	14	14	14	14	14
	Drain Connection (no.and size) - in.	(1) 1 NPT	(1) 1 NPT	(1) 1 NPT	(1) 1 NPT	(1) 1 NPT
	Expansion device type	Balanced Port Thermostatic Expansion Valve, removeable power head			Refrigerant Metering Orifice (RFC)	
[4] Indoor Blower & Drive Selection	Nominal Motor HP	1 hp, 2 hp	1 hp, 2 hp	1 hp, 2 hp	1 hp, 2 hp	1 hp
	Maximum Usable Motor HP	1.15 hp, 2.3 hp	1.15 hp, 2.3 hp	1.15 hp, 2.3 hp	1.15 hp, 2.3 hp	1.15 hp
	Available Drive Kits	A01 673 - 1010 rpm A05 897 - 1346 rpm	A02 745 - 1117 rpm A06 1071 - 1429 rpm	A03 833 - 1250 rpm A07 1212 - 1548 rpm	A04 968 - 1340 rpm A08 1193 - 1591 rpm	AA01 522 - 784 rpm
	Nominal Motor HP	---	---	---	---	2 hp
	Maximum Usable Motor HP	---	---	---	---	2.3 hp
	Available Drive Kits	---	---	---	---	AA02 632 - 875 rpm AA03 798 - 1105 rpm
		---	---	---	---	3 hp
		---	---	---	---	3.45 hp
		---	---	---	---	AA04 921 - 1228 rpm
	Wheel nominal diameter x width - in.	10 x 10	10 x 10	10 x 10	10 x 10	15 x 9
Filters	Type	Disposable			Disposable	
	Number and size - in.	(4) 16 x 20 x 2			(4) 20 x 20 x 2	
Electrical Characteristics - 60 Hz		208/230V, 460V & 575V 3 phase	208/230V, 460V & 575V 3 phase	208/230V, 460V & 575V 3 phase	208/230V, 460V & 575V 3 phase	208/230V, 460V & 575V 3 phase

NOTE - Net capacity includes evaporator blower motor heat deduction. Gross capacity does not include evaporator blower motor heat deduction.

[1, 2] AHRI Certified to AHRI Standard [1] 210/240 or [2] 340/360: 95°F outdoor air temperature and 80°F db/67°F wb entering evaporator air; minimum external duct static pressure.

[3] Sound Rating Number (SRN) rated in accordance with test conditions included in ARI Standard 270-95.

[4] Using total air volume and system static pressure requirements determine from blower performance tables rpm and motor hp required. Maximum usable hp of motors furnished are shown. In Canada, nominal motor hp is also maximum usable motor hp output. If motors of comparable hp are used, be sure to keep within the service factor limitations outlined on the motor nameplate.