

BLOCK

446.05

LOT

3

ADDRESS (SITE)

PERMIT NO

1221-95

EMPTY UNIT



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work-site at: 550 BRICK BLVD.
DEAN SMITH-RIVIERA PLAZA
2. Name of Owner in Fee: DEAN SMITH-RIVIERA PLAZA Tel. ()
Address Sama
street municipality zip code
3. Ownership in Fee: Public Private
4. Principal Contractor: ROBERT CARBONE Tel. ()
Address 766 MANTOLOKING Rd BRICK, NY
- 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. ()

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$		
2. Electrical			
3. Plumbing		75.	
4. Fire Protection		33	
5. Elevator Devices			
6. Subtotal	\$	108 -	
7. Less 20% for State Plan Review		21.6	
8. Subtotal	\$		
9. DCA Training Fee		6 -	
10. Subtotal	\$		
11. Cert. of Occupancy		20 -	
12. Other			
13. TOTAL	\$	134 -	

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)

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

7000

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

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:
RIVIERA PLAZA

3. 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 _____ 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	
☐ 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

Control #

Permit #

5/19/95
1221-95

IDENTIFICATION

Block

446.05

Lot

3

Work Site Location

550 Peach Road

Contractor

Robert (Carpenter)

Address

566 Main Street

Owner in Fee

D. J. Smith - Pioneer Home

Address

550 Peach Road

Tele. ()

Lic. No. or Bids. Reg. No.

Exp. Date

Tele. ()

Federal Emp. No.

or Social Security No.

0005

is hereby granted permission to perform the following work:

☐ BUILDING☒ PLUMBING☐ OTHER☐ ELECTRICAL☒ FIRE PROTECTION

DESCRIPTION OF WORK:

Sumner

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 \$

7,000

CONSTRUCTION OFFICIAL

U.C.C. Form F-170A

PAYMENTS (Office Use Only)

Building

Plumbing

Electrical

Fire Protection

Other

Other

DCA Training Fee

Cert. of Occ.

Other

Total

Check No.

Cash

Collected By:

0.00

0.00

5.00

5.00

5.00

5.00

6.00

10.00

14.00



FIRE PROTECTION SUBCODE TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

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

Block 446.05 Lot 3

Work Site Location 550 BRICK BLVD

Owner in Fee DEAN MARTIN- RIVERA PLAZA
Address Same

Tele. () Robert Carbone HVAC, Inc.

Contractor 766 MANOTOCANIG RD

Address BRICK, NJ

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 [] Existing

Type: [] 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

[] Fire Plans Approved

Date: 5/17/95

Approved by: [Signature]

SUBCODE APPROVAL:

[] CO [] CCO [] CA

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.

SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

Water Supply Source

Method of Valve Supervision

Local Alarm Supervision

Central Supervision

Proprietary Supervision

Flammable Liquid Storage Tanks

Combustible Liquid Storage Tanks

L.P.G. Storage Tanks

L.N.G. Storage Tanks

Number

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

1

Gas or Oil Fired Appliance

OTHER

1

Paid [] Check #

Collected by:

Administrative Surcharge

Minimum Fee

DCA Training Fee

TOTAL FEE

FEE (Office Use Only)

33-

33

33

33

33

33

33

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Permit
TOWNSHIP OF JACKSON
95-W. Veterans Highway
Jackson, New Jersey 08527
(908) 968-1200 (ext. 221)



**PLUMBING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

5/19/95
1221-95

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

Work Site Location 580 Rt. 519 Sec 15
Rivera Plaza

Owner in Fee Dean Sm. Jr.

Address 580 Rt 519 So. 15
Brick NJ 08703

Tele. (908) 477-2000

Contractor Robert Carbone Hunt Inc.

Address 766 Mantoloking Rd Bricktown NJ 08703

Tele. (908) 736-1306

Lic. No. 6108337

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				
[] No Plans Required		Type:	Failure	Failure	Approval	Initial
Joint Plan Review Required:		Slab				
[] Bldg. [] Elec.		Rough				
[] Fire [] Elevator		Water				
[] Plumb. Plans Approved		Sewer				
Date: <u>5/18/95</u>		Fixtures				
Approved by: <u>[Signature]</u>		Gas Equipment				
		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 of Contractor Seal

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	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	75
	Gas Piping	
	Steam Boiler	
	Hot Water Boiler	25
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Water Cooled A/C	
	or Refrigeration Unit	
	Sewer Connection	
	Water Service Connection	
	Active Solar System	
☒	Other <u>25' x 10' Rooftop (B)</u>	75

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

☒ Licensed Plumbing Contractor [] Exempt Applicant



6 TON (21.1 kW)
SPECIFICATIONS
SUMMARY SHEET

(B)

BASIC MODEL

Model No.	Voltage	Catalog No.	Model No.	Voltage	Catalog No.
CHA24-813-00	☐ 208/230v-60hz-3ph	80J75	GCS24-813-78	☐ 208/230v-60hz-3ph	80J69
	☐ 460v-60hz-3ph	80J76		☐ 460v-60hz-3ph	80J72
	☐ 575v-60hz-3ph	80J77	GCS24-813-130	☐ 208/230v-60hz-3ph	80J70
				☐ 460v-60hz-3ph	80J73
			◇ GCS24-813-95/130	☐ 208/230v-60hz-3ph	80J71
				☐ 575v-60hz-3ph	80J74

FACTORY INSTALLED OPTIONS

Option	Description
☐ Electric Heat Package (CHA24 models)	Sizes from 7kW to 25kW, includes sub-fuse box
☐ Electrical Convenience Package	Includes unit disconnect and dual 120v GFCI service outlets (field wired)
☐ Low Ambient Controls	Low ambient controls (down to 30°F (-1.1°C)) factory wired
☐ Logic Controls Package	Factory run tested, agency approved. <i>Novar package includes ETM module and return air sensor</i>
Economizer Package (With Gravity Exhaust)	☐ Enthalpy controlled
	☐ Logic controlled
☐ Outdoor Air Damper Package	Includes linked damper assembly and outdoor air hood
☐ Smoke Detector Package	Photoelectric type, installed and wired in return air section
Corrosion Protection Package	☐ Condenser Section only
	☐ Condenser & Evaporator Sections

FIELD INSTALLED ACCESSORIES

Accessory Description	Model No.	Catalog No.	Electric Heat Model No.	Voltage	Catalog No.
☐ Roof Mounting Frame	RMF24-81	45J19	☐ ECH24-7	208/230v-60hz-3ph	45J31
☐ Economizer (Down-Flow or Horizontal) (includes Gravity Exhaust Dampers)	REMD24M-81	45J20	☐ ECH24-7	460v-60hz-3ph	45J37
☐ Differential Enthalpy Control	—	54G44	☐ ECH24-7	575v-60hz-3ph	45J43
☐ Horizontal Supply & Return Air Kit	HDK24-81	45J25	☐ ECH24-10	208/230v-60hz-3ph	45J32
Concentric Diffusers	☐ Step-Down	RTD11-95	☐ ECH24-10	460v-60hz-3ph	45J38
	☐ Flush	FD11-95	☐ ECH24-10	575v-60hz-3ph	45J44
☐ Supply & Return Air Transitions	SRT24-81	48J27	☐ ECH24-15	208/230v-60hz-3ph	45J33
☐ Outdoor Air Damper Kit (Manual)	OAD24-81	45J21	☐ ECH24-15	460v-60hz-3ph	45J39
☐ Outdoor Air Damper Kit (Automatic)	OAD24M-81	45J22	☐ ECH24-15	575v-60hz-3ph	45J45
☐ Timed-Off Control Kit	LB-50709BA	32F21	☐ ECH24-20	208/230v-60hz-3ph	45J34
◇ ☐ Cold Weather Kit	TC24-330	65C03	☐ ECH24-20	460v-60hz-3ph	45J40
☐ LPG/propane Kit (1 stage)	LB-65829A	45J23	☐ ECH24-20	575v-60hz-3ph	45J46
◇ ☐ LPG/propane Kit (2 stage)	LB-65825A	45J24	☐ ECH24-25	208/230v-60hz-3ph	45J35
◇ ☐ High Altitude Kit	LB-65878A	49J48	☐ ECH24-25	460v-60hz-3ph	45J41
☐ Low Ambient Kit (down to 30°F (-1.1°C))	LB-57113BC	24H77	☐ ECH24-25	575v-60hz-3ph	45J47
			☐ ECH24-30	208/230v-60hz-3ph	45J36
			☐ ECH24-30	460v-60hz-3ph	45J42
			☐ ECH24-30	575v-60hz-3ph	45J48

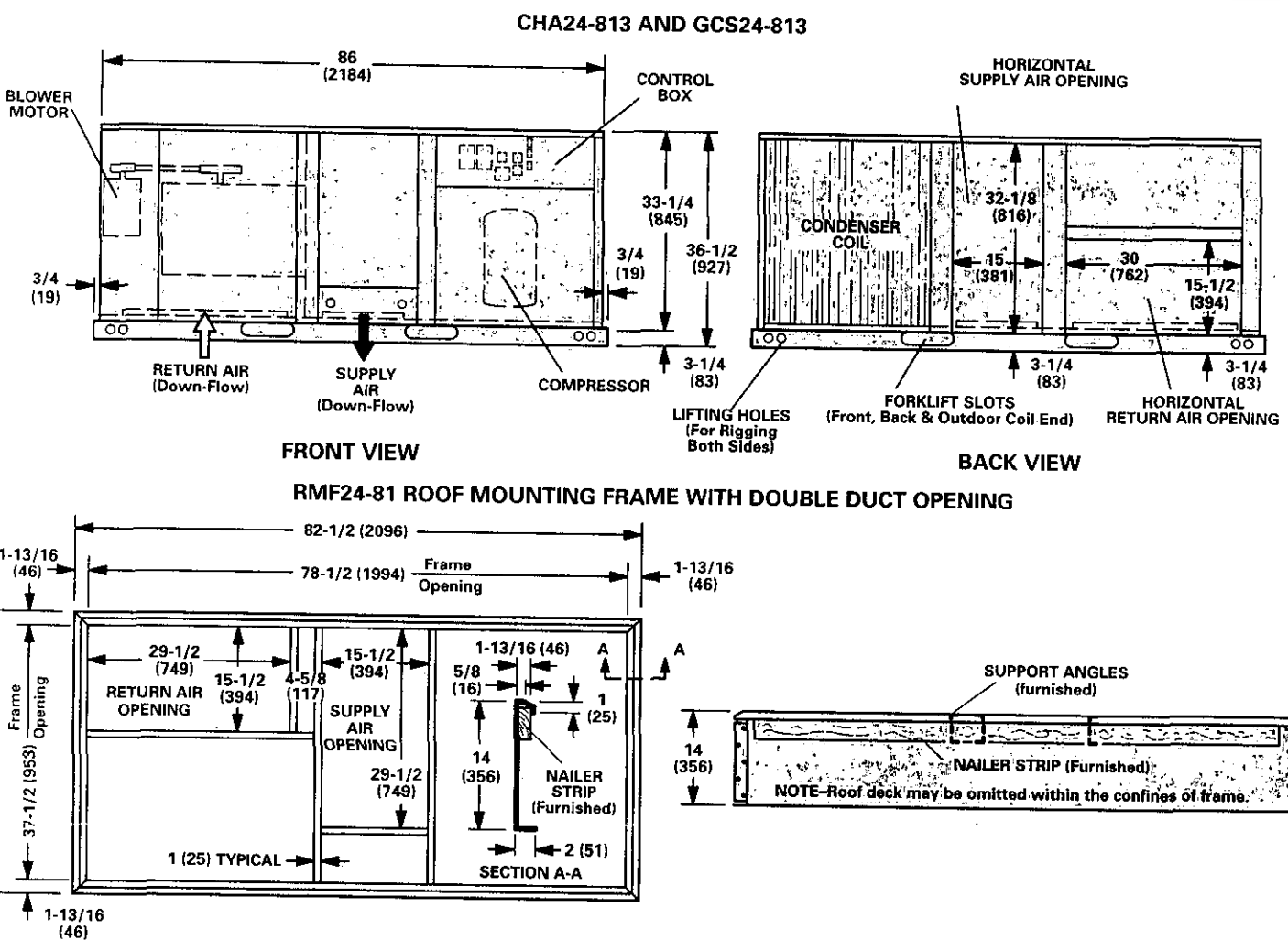
◇ The maple leaf symbol denotes Canadian only usage where applicable
NOTE — Due to Lennox' ongoing commitment to quality, Specifications, Ratings and Dimensions subject to change without notice. ©1994 Lennox Industries Inc.

(B)

SPECIFICATIONS — 6 TON (21.1 kW)

	EER	Capacity — Btuh (kW)		Air Volume Range cfm (L/s)	Voltage 3ph-60hz	Net Weight lbs. (kg)
		Cooling	Heating			
CHA24-813	9.5	73,000 (25.8)	----	1600 – 3000 (755 – 1415)	208/230v/460v/575v	700 (318)
GCS24-813-78	10.0	73,000 (25.8)	78,000 (22.9)	1600 – 3000 (755 – 1415)	208/230v/460v/575v	734 (333)
GCS24-813-130	10.0	73,000 (25.8)	130,000 (38.1)	1600 – 3000 (755 – 1415)	208/230v/460v/575v	759 (344)
GCS24-813-95/130	10.0	73,000 (25.8)	95,000/130,000 (27.8/38.1)	1600 – 3000 (755 – 1415)	575v	759 (344)

DIMENSIONS — inches (mm)



- STANDARD FEATURES
- Hinged Filter Access
 - Hinged Control Box Cover
 - Convertible Discharge

- 1.5 hp (1120W) Blower Motor
 - Crankcase Heater

- Tubular Heat Exchanger (GCS24)
 - 2 in. (51 mm) Pleated Filters





LENNOX®

04-94 AIR CONDITIONING • HEATING