

BLOCK 554 LOT 11 QUALIFICATION CODE _____ ADDRESS (SITE) 180 DRUM PT. PERMIT NO. 08-1031



CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: 180 DRUM POINT RD (COUNTRY FARM)
2. Name of Owner in Fee: JEFFERY & SHIRLEY ALINO
Tel. (732) 477-2099 e-mail JALINO@AOL.COM
Address 128 CAPTAINS DRIVE BRICK, NJ 08723
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: SHANE WOOD Tel. (732) 300-7184
Address _____ e-mail _____
License No. OR, if new home, Builder Reg. No. 13VH04259400 Exp. Date 12-31-08
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH04259400
Federal Emp. ID No. 155C44787 FAX: (_____) _____
5. Architect or Engineer _____ Contact _____
Address _____ e-mail _____
Tel. (_____) _____ FAX: (_____) _____
6. Responsible Person in Charge once Work has Begun SHANE WOOD
Tel. (732) 300-7184 FAX: (_____) _____

V. FEE SUMMARY (for office use only)

	Update	Update
1. Building	\$ <u>30</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 Surcharge Fee		
10. Subtotal	\$ <u>54</u>	
11. Cert. of Occupancy		
12. Other		
13. TOTAL	\$ <u>54</u>	

VI. BUILDING/SITE CHARACTERISTICS

- Number of Stories _____
- Height of Structure _____ ft.
- Area — Largest Floor _____ sq. ft.
- New Building Area _____ sq. ft.
- Volume of New Structure _____ cu. ft.
- Max. Live Load _____
- Max. Occupancy Load _____
- If Industrialized Building: State Approved _____ HUD _____
- Total Land Area Disturbed _____ sq. ft.
- Flood Hazard Zone _____
- Base Flood Elevation _____ ft.
- 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
						Approval Rejection	
						<u>9-28-08</u>	

TOTAL COST

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

- State Specific Use: _____
- Use Group, Proposed: _____
- Change in Use Group, Indicate Present: _____
- No. of dwelling units: Total Units Income-restricted
Gained, Sale _____
Gained, Rental _____
Lost, Sale _____
Lost, Rental _____

B. NON-RESIDENTIAL (primary use)

- State Specific Use: _____
- Use Group, Proposed: _____
- 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:

- ☐ 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
- ☐ LPGas Tanks



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 9/24/2008
Control Number C-08-002691
Permit Number 08-1631
Permit Issue Date 6/4/2008
Certificate Number 08-1631

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 180 DRUM POINT RD. Brick Township, NJ Block: 554 Lot: 11 Qual: _____
Owner in Fee: ALINO, JEFFREY & SHIRLEY
Owner Address: 180 Drum Point Road BRICK NJ 08723
Telephone: (732) 477-2099
Contractor Shaine's Home Improvements
Address 210 Cedar Grove Toms River NJ 08753
Telephone: (732) 300-7184 Fax: _____
License Number or Builders Registration Number: 13VH04259400 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: _____

Date Printed: 9/24/2008

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

Page 1

CERTIFICATION IN LIEU OF OATH

I. OWNER SECTION (to be completed if the applicant is the owner in fee)

I hereby certify that I am the owner in fee of the property listed on Page 1.

Mark the following applicable boxes:

- A. ☒ I further certify that a new home (private residence) will be constructed on this property for my own use and occupancy. This dwelling is to be occupied by myself and is not to be used for any purpose other than single family residential use. I attest that all construction, plumbing, or electrical work will be done, in whole or in part, by me or by subcontractors under my supervision, in accordance with all applicable laws; and, I further acknowledge that said new home is not covered under the New Home Warranty and Builders Registration Act (N.J.S.A. 46:3B-1 et seq.) and that such fact shall be disclosed to any person purchasing this property within ten years of the date of issuance of a certificate of occupancy.

I UNDERSTAND THAT IN MARKING BOX A, I ACKNOWLEDGE THAT I AM ASSUMING RESPONSIBILITY FOR THE WORK DONE ON SAID PROPERTY, THE CONDITION OF THE PROPERTY PRIOR TO, DURING, AND AFTER ANY WORK PERFORMED, AND FOR THE PERFORMANCE OF THE SUBCONTRACTORS I HIRE, EMPLOY, OR OTHERWISE CONTRACT OR WITH WHOM I MAKE AGREEMENTS TO PERFORM WORK. I AM VOLUNTARILY AND KNOWINGLY ASSUMING THIS RESPONSIBILITY.

- B. ☒ I further certify the following as required by the New Jersey Uniform Construction Code, N.J.A.C. 5:23-2.15(e)1.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

Shane Wood

Date

6-4-08

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. 5:23-2.15(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

Shane Wood

Address

210 Cedar Grove Rd T.R. 08753

Telephone

(732) 300-7184

Signature

Shane Wood

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



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 554 Lot 11 Qualification Code _____
Work Site Location 180 Drum Point Road

Owner In Fee VERNEY + SHIRLEY ALINO
Address 1287 CANTAIN DRIVE

Tel. () 732-477-2059

Contractor SHAWNEE CONSTRUCTION

Address 210 CEDAR GROVE RD. T.R. 08753

Tel. (732) 308-7184 FAX () 308-7184
Contractor License No. or Builder Registration No. 13UH04259400
Federal Emp. No. 155 64 4787

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Failure	Dates (Month/Day)	Approval	Initial
☐ No Plans Required			Type:				
☐ All			Footings				
☐ Footing			Footings Bonding				
☐ Foundation			Foundation				
☐ Frame			Slab				
☐ Other			Frame				
			Truss Sys./Bracing				
			Barrier-Free				
			Insulation				
			Finishes - Base Layer				
			Finishes - Final				
			Energy				
			Mechanical				
			TCO				
			Other				
			Barrier-Free				

Joint Plan Review Required: ☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator

SUBCODE APPROVAL

☐ CO ☐ CCO ☐ CA

Date: 9-23-08

Approved by: [Signature]

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work: 3000.

1. New Bldg. \$ _____

2. Rehabilitation \$ _____

3. Total (1+2) \$ _____

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

OVERLAY 30 year
OWENS Shingles.

TYPE OF WORK:

- ☐ New Building
- ☐ Addition
- ☐ Rehabilitation
- ☒ Roofing
- ☐ Siding
- ☐ Fence
- ☐ Sign
- ☐ Pool
- ☐ Asbestos Abatement Subchapter 8
- ☐ Lead Haz. Abatement NJAC 5:17
- ☐ Other
- ☐ Demolition

FEE (Office Use Only)

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

08-1031
6/4/08



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 554 Lot 11 Qualification Code 180
Work Site Location Belvidere, NJ 08753

Owner in Fee: Aino

Tel. () 180 Deum PT. Rd. Belvidere, NJ
Address 180 Deum PT. Rd. e-mail Belvidere, NJ
City Belvidere State NJ Zip 08753

Contractor: Shayla Home Municipality TPP Tel. () 788 300-7784
Address 210 Cedar Grove e-mail TPP
City Belvidere State NJ Zip 08753

Contractor License No. or Builder Registration No. 1344455948 Date 12/14/05

Home Improvement Contractor Registration No. or Exemption Reason (if applicable):
Federal Emp. ID No. 1344455948 FAX: ()

JOB SUMMARY (Office Use Only)

PLAN REVIEW

Date 09/15/08 Initial TPP

INSPECTIONS

Dates (Month/Day)

Initial

☒ No Plans Required 09/15/08 Type: Footings Failure Footings Approval Footings

☐ All Footings Failure Footings Approval Footings

☐ Footings/Foundations Footings Failure Footings Approval Footings

☐ Structural/Framework Foundation Failure Foundation Approval Foundation

☐ Exterior Slab Failure Slab Approval Slab

☐ Interior Frame Failure Frame Approval Frame

☐ Joint Plan Review Required: Truss Sys./Bracing Failure Truss Sys./Bracing Approval Truss Sys./Bracing

☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator Insulation Failure Insulation Approval Insulation

SUBCODE APPROVAL for PERMIT Finishes -Base Layer Failure Finishes -Base Layer Approval Finishes -Base Layer

Date: 09/15/08 TPP Failure TPP Approval TPP

Approved by: TPP Failure TPP Approval TPP

SUBCODE APPROVAL for CERTIFICATE TCO Failure TCO Approval TCO

☐ CO ☐ CCQ 09-2508 Failure 09-2508 Approval 09-2508

Date: 09/15/08 TPP Failure TPP Approval TPP

Approved by: TPP Failure TPP Approval TPP

B. BUILDING CHARACTERISTICS

Use Group Present Proposed Constr. Class Present Proposed

No. of Stories Proposed If Industrialized Building: Proposed

Height of Structure ft. State Approved HUD

Area — Largest Floor sq. ft. Est. Cost of Bldg. Work: 1. New Bldg. \$

New Bldg. Area/All Floors sq. ft. 2. Rehabilitation \$

Volume of New Structure cu. ft. 3. Total (1+2) \$

Max. Live Load 500

Max. Occupancy Load 500

U.C.C. F-110 (rev. 12/07)

update

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 TPP

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

metal roofing system

TYPE OF WORK:

☐ New Building

☐ Addition

☐ Rehabilitation

☐ Roofing

☐ Siding

☐ Fence Height (exceeds 6')

☐ Sign Sq. Ft.

☐ Pool

☐ Retaining Wall Sq. Ft.

☐ Asbestos Abatement Subchapter 8

☐ Lead Haz. Abatement NJAC 5.17

☐ Radon Remediation

☐ Other

☐ Demolition

FEE (Office Use Only)

\$ 40

Administrative Surcharge \$ 40

Minimum Fee \$ 40

State Permit Surcharge Fee \$ 40

TOTAL FEE \$ 40

1 White = Inspector Copy

2 Canary = Office Copy

3 Pink = Office Copy

4 Gold = Applicant Copy

08-1631-44
9/17/08
08-104391



PERMIT UPDATE

Date Update Issued 9/17/2008
Control # C-08-004391
Permit # 08-1631+A

IDENTIFICATION Block: 554 Lot: 11 Qualifier _____
Work Site Location: 180 DRUM POINT RD. Brick Township, NJ Contractor Shaine's Home Improvements
Address 210 Cedar Grove Toms River NJ 08753
Owner in Fee ALINO, JEFFREY & SHIRLEY
180 Drum Point Road BRICK NJ 08723 Telephone: (732) 300-7184
Telephone: (732) 477-2099 Lic. No. or Bldrs. Reg. No. 13VH04259400
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
(Subchapter 8 only) | ☐ OTHER |

DESCRIPTION OF WORK:

ALTERATION - RESIDENTIAL METAL ROOFING SYSTEM

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 \$500

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	\$40
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	
Other	\$0
Total	\$41
Check No.	
Cash	\$41
Credit	\$0
Collected By	Inspection Account

REQUIRED INSPECTIONS

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

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

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

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

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

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

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

☐ A complete copy of released plans must be kept on the job site.

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



CONSTRUCTION PERMIT

Date Issued 6/4/2008
Control # C-08-002691
Permit # 08-1631

IDENTIFICATION Block: 554 Lot: 11 Qualifier _____
Work Site Location: 180 DRUM POINT RD. Brick Township, NJ Contractor Shaine's Home Improvements
Address 210 Cedar Grove Toms River NJ 08753
Owner in Fee ALINO, JEFFREY & SHIRLEY
180 Drum Point Road BRICK NJ 08723 Telephone: (732) 300-7184
Lic. No. or Bldrs. Reg. No. 13VH04259400
Telephone: (732) 477-2099 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 (Subchapter 8 only) ☐ OTHER

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 \$3,000

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	\$50
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$4
CO Fee	
Other	\$0
Total	\$54
Check No.	
Cash	\$54
Credit	\$0
Collected By	Inspection Account

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.

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

Shaine's Home Improvements
Shane Wood
210 Cedar Grove
TOMS RIVER, NJ 08753

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

01/28/2008 TO 12/31/2008

VALID

13VH04259400
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder
Shane Wood

ACTING DIRECTOR
Lawrence DeMauro

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

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs
HAS REGISTERED
Shaine's Home Improvements
Home Improvement Contractor

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE
01/28/2008 TO 12/31/2008

VALID

SIGNATURE

13VH04259400

License/Registration/Certificate #

ACTING DIRECTOR

Lawrence DeMauro

PLEASE DETACH HERE
IF YOUR LICENSE/REGISTRATION/
CERTIFICATE ID CARD IS LOST
PLEASE NOTIFY:
Division of Consumer Affairs
P.O. Box 46016
Newark, NJ 07101

PLEASE DETACH HERE



Metal ROOFING SYSTEMS

pg. #6

Featuring
Batten Seam
Standing Seam
Tile & Shingles

Metal WALL PANELS

Featuring
Facades, Mansards,
Curved Panels, Soffits,
Ceilings, Light Gauge Framing,
Custom Accessories, & Rainware

ATAS INTERNATIONAL, INC.

www.atas.com

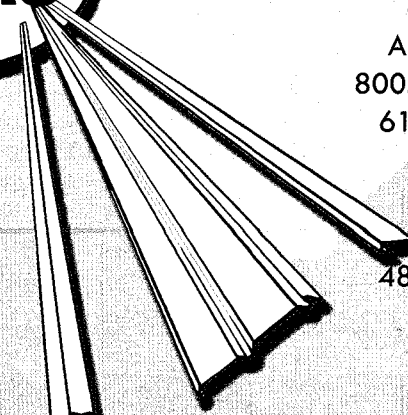
email: info@atas.com



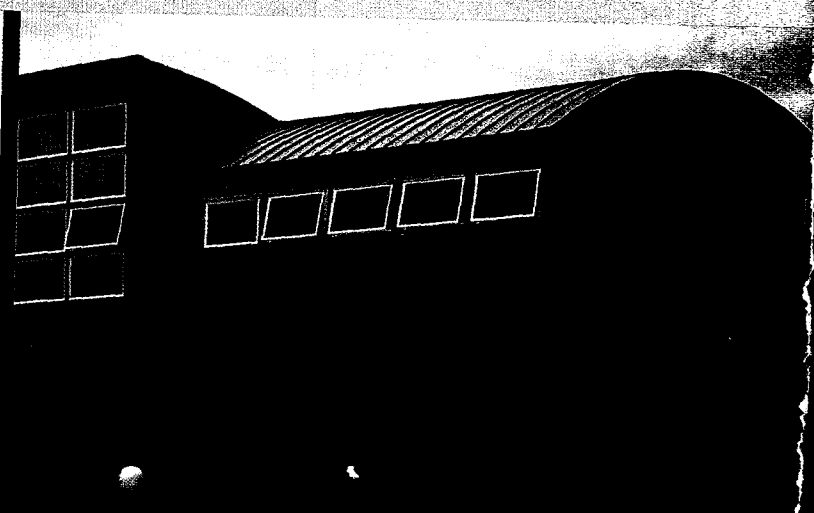
6612 Snowdrift Rd.
Allentown, PA 18106
800.468.1441 toll-free
610.395.8445 phone
610.395.9342 fax

Mesa, AZ
480.558.7210 phone
480.558.7217 fax

Maryville, TN
800.468.1441



PC™ snap-on system



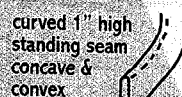
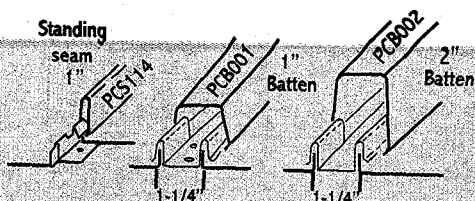
The PC systems consist of two parts. The Seam is snapped over the clips and fasteners concealing the fastening system. With the Batten style, the system is installed with a spacer clip and is snapped in place. The PC systems are not structural panels and must be applied to a solid substrate. PC panels can be used for tapered and curved installations.

PC Pan SKU:	PCP110, PCP120, PCP150, PCP999
PC Seam SKU:	PCS114
PC Batten SKU:	PCB001, PCB002
PC Copper SKU:	PCP147
Gauge:	.032 and .040 Aluminum, 24 ga. G90 Galvanized Steel 16 oz. Copper (PCP147 only)
Pan Widths:	11-1/4", 12-5/8", 14-3/4"*, 15-1/4"
Panel Length:	Cut to customer specifications with a min. of 2'-0", max. to transportation limits
Seam Height:	Standing Seam 1", Batten Seam 1" x 1.5" and 2" x 1.5", Curved 1" standing seam only
Texture:	Embossed, Smooth
Available:	straight, tapered, convex, or concave
Finish:	KYNAR 500® or HYLAR 5000®
Anodized:	Clear, Bronze
Colors:	Choice of 30 standard colors
Minimum Pitch:	3:12
* - Copper Only Inquire for availability	

CURVED PC™ system

CURVED PC SYSTEM, (PCX, PCV) is a standing seam panel consisting of a SNAP-ON SEAM with concealed clip and fastener system. The panel comes in 11-1/4", 12-5/8", 14-3/4" (Copper Only) and 15-1/4" standard widths. Custom widths are available. The panel system can be curved in concave or convex styles. Choice of smooth or embossed finish with a selection of 30 colors. Base metal is 24 gauge G90 Steel, .032 or .040 Aluminum with a KYNAR 500® or HYLAR 5000® coating and Copper.

Curved PCSKU:	PCX, PCV
Gauge:	.032 or .040 Aluminum, 24 ga. G90 Galvanized Steel
Pan Widths:	11 1/4", 12 5/8", 14-3/4" (copper only), 15 1/4"
Panel Length:	Cut to customer specifications with a min. of 3'-0", max. to transportation limits
Seam Height:	1"
Texture:	Embossed, Smooth
Curve:	Convex or Concave
Finish:	KYNAR500® or HYLAR5000®
Anodized:	Clear, Bronze
Colors:	Choice of 30 standard colors
Minimum Pitch:	3:12 Inquire for availability



MINIMUM RADIUS:
Convex 2'-9"
Concave 4'

ATAS Roof Panel Specifications

	Pg	SKU	Width to the Weather	Height/Size Range	Gauge & Material Information below includes standards only. See product page for specials.	Length+++ Min. Max.	Pitch	Test/ Rating ++++	Texture
Monarch Roof Systems	3	MRB120 MRB160	12" 16"	2"	.032, .040, .050 alum. 24 gauge steel	Customer specify 4' +++	2:12	1-2-3-4-5-10-15-16	Smooth & Stucco Emboss w/ or w/o ribs
Dutch Standing Seam	3	MRD110 MRD150 MRD194	11" 15" 19-1/4"	1-1/2"	.032, .040 alum. 24 gauge steel	Customer specify 2' +++	2:12	1-2-3-4-5-8-10-11-14-15-16-17-18	Smooth & Stucco Emboss w/ or w/o ribs
Field-Lok Panel - 2-3/8"	4	FLS137 FLS180	13-3/4" 18"	2-3/8"	.032, .040 alum. 24 gauge steel	Customer specify 4' +++	1/2:12	1-2-3-6-7-10-11-13-15-16	Smooth w/ or w/o ribs
Field-Lok Panel - 2"	4	FLN145 FLN187	14-1/2" or 18-3/4"	2"	.032 alum. 24 gauge steel	Customer specify 4' +++	1/2:12	1-2-3-4-5-10-11-14-15-16	Smooth w/ or w/o ribs
Field-Lok Panel - 1 1/2"	5	FLM125, FLM165, FLM207	12-1/2", 16-1/2" or 20 3/4"	1-1/2"	.032 alum. 24 gauge steel	Customer specify 4' +++	2:12	1-2-3-4-5-10-11-14-15-16	Smooth w/ or w/o ribs
Field-Lok Panel - 1"	5	FLL135 FLL175 FLL217	13-1/2", 17-1/2" or 21-3/4"	1"	.032 alum. 24 gauge steel	Customer specify 4' +++	2:12	2-3-10-15-16	Smooth w/ or w/o ribs
PC Systems	6	PC_	11-1/4", 12-5/8", 14-3/4", or 15-1/4"	PCS 1" PCB 1" or 2"	.032, .040 alum. 24 gauge steel	Customer specify 2' +++	3:12 Min. rad. 2'-9" 4'	2-3-4-5-10-14-15-16	Smooth & Embossed
Advanta Shingle	7	HAS300	12" x 36"	1/2"	29 gauge. steel	Modular	3:12	2-9-10-13-14-15-16-17	Stucco Emboss
Rumba Shake	7	HBS090	9"	1"	.032 alum. 24 gauge steel	Customer specify 12' 20'	4:12	2-4-5-10-11-14-15-16	Smooth
Permashake	8	HPS106	10" x 60"	1"	.032 alum. 29 gauge. steel	Modular	5:12	2-10-12-14-15-16-17	Wood Grain
Standing Seam Shingle	8	HSS163 HSS166	16" x 36" 16" x 60"	1"	29 gauge steel 16 oz copper	Modular	4:12	2-10-12-14-15-16-17	Smooth
CastleTop Shingle	9	HCT160	13-1/2" x 13-1/2"	1/2"	.032 alum. 16 oz. copper .028 zinc	Modular	3:12	2-10-12-13-14-15-16	Smooth & Embossed
Granutile	9	HGT144	43-3/4" x 14-1/2"	1"	Stone coated steel	Modular	3:12	2-3-9-10-12-13-15-17	Stone Coated
Scanroof	10	SCP163	13'-2" x 16-1/2"	From 1" rib to 2" purlin	24 gauge steel	Modular	3:12	2-3-9-10-14-15-16-17	Smooth
Techo Tile	10	SCT400	40" wide	2-5/8"	.032 alum. 24 gauge steel	Customer Specify 18-1/2" +++	3:12	2-10-12-13-14-15-16-17	Glazed & Traditional
Grand Series	11	BWV320 BWV330	32" 33"	1/2"	29 gauge. steel	Customer Specify 6'-0" 20'-0"	3:12		Smooth

Finish: KYNAR500® or HYLAR5000®
Colors: See page 24. Not all colors are available in all gauges or metals. Please call to verify.

Weight/100sq. ft: For Aluminum, .032 appr. 65 lbs., .040 appr. 80 lbs., .050 appr. 100 lbs. For Steel, 24 gauge appr. 140lbs.

Accessories: Coping, Roof Cap, Valley, T-Bar, Gutter, Eave Trim, Gable, Flashings, etc. Custom or Standard Formed, available in all gauges and metals. See Page 21
Applications: New or Retrofit, Roofs, Facades, Carports, Canopies, Store Fronts, Entranceways, Equipment Screens, Parapet Waterproofing.

ATAS International, Inc. roof and wall products have been tested in accordance with the most stringent standards specified by building code and industry organizations. Test reports for a variety of test standards, materials and assemblies are available, along with wind load tables. Contact ATAS support personnel to obtain appropriate information for your project. The Engineer and/or Architect should utilize this data in conjunction with knowledge of the local conditions to determine construction requirements for specific projects. They must verify that the roof design will meet the requirements for all local codes of the individual projects.

ATAS Wall Panel Specifications

	Pg	SKU	Width to the Weather	Height/Size Range	Gauge & Material Information below includes standards only. See product page for specials.	Length+++ Min. Max.	Pitch	Test/ Rating ++++	Texture
Multi-Purpose	12	MP_	8" 12" 16"	1-1/4"	.032,.040 alum. 24 ga steel	Customer specify 2' +++	3:12	1-2-3-4-5-10-15-16-18	Smooth & Embossed
Opaline	12	OP_	4",6",8" 4-1/2", 6-1/2" 8-1/2"	3/4"	.032, .040, alum. 24 ga steel	Customer specify 1'-6" +++	Wall Only	1-10-15-16	Smooth & Embossed
Metafor	13	MFP120	12"	5/8"	.032, .040 .050 alum	Customer specify 2' +++	3:12	1-10-15-16	Smooth & Embossed
Arc-Metafor	13	MFV120 MFX120	12"	5/8"	.032 alum.	Customer specify N/A	Min. rad. 2'-9" 4'	1-10-15-16	Smooth & Embossed
Rigid Wall	14	MFR160	16"	7/8"	.032, .040,.050 alum.	Customer specify 6' +++	Wall Only	1-2-4-5-10-15-16	Smooth & Embossed
Concealed Fastener Corrugated	14	NEW for 2007	16"	7/8"	.032, .050 alum. 24 ga. steel	Customer specify 6' +++	Wall Only		Smooth
Inspire	15	BWS390 BWS392	39-3/8"	1-1/4"	.032 alum. .027 zinc	Customer specify +++	Wall Only	1-10-16	Perforated
Design Wall	16	DSF120 DSH120 DWF120 DWH120	12"	1-3/4" 1-1/18"	.032, .040 alum. 24 ga steel	Customer specify 3' +++	Wall Only	1-2-4-5-10-15-16	Smooth & Embossed
Belvedere Wall Systems	16 & 17	BWS240 BWR360 BWK360 BWG390 BWC374	24" 36" 36" 39" 37-1/4"	4" 1-1/2" 1-1/2" 1-1/2" 7/8"	.032,.040 .050 alum. 24 ga. steel	9' +++ 6' +++ 6' +++ 6' +++ 6' +++	Wall Only	1-2-4-5-10-14-15-16	Smooth & Embossed
Curved Corrugated	18	BWX374 BWV3745	37-1/4"	7/8"	.032,.040, .050 alum. 24 ga. steel	Customer specify 6' +++	Min. rad. 10'	1-2-10-15-16	Smooth & Embossed
Curved Standing Seam	18	FLX_	See Field-Lok 1" and 1-1/2"	1" 1 1/2"	.032 alum. 24 ga. steel	Customer specify 2' +++	Min. rad. 28' steel 16' alum.	2-3-4-5-10-14-15-16	Smooth
Ceilings & Soffits	19	LCR_ LCB_ MPV120 MPS120	3-3/8" - 7-3/8" - 11-3/8" 12"	5/8" 3/8"	.019, .024, .032 alum.	Customer specify 8' 45' 8' +++	N/A	1-10-15-16	Smooth Only Smooth & Embossed

Test/Rating Chart

- 1 Load Tables
- 2 UL 790/ ASTM E108
- 3 UL 580
- 4 ASTM E 283
- 5 ASTM E 331
- 6 ASTM E 1646
- 7 ASTM E 1680
- 8 ASTM E 330
- 9 ICC ES Report

10 Field Tested

- 11 ASTM E 1592
- 12 PA 100-95 (R&D only)
- 13 UL 1897
- 14 UL 2218
- 15 ASTM E 84 Flame Spread Rating
- 16 Paint Perfm. Tests
- 17 ICBO AC166 Penetra.
- 18 AAMA 501.1
- 19 Florida Product Approval

Notes:

- +++ The maximum length of the panels is restricted by the transportation limitations.
- ++++ Testing results, calculations and ratings available from the manufacturer. See chart. Not every panel in each panel category has been tested.

Final choice of materials and installation is the responsibility of the owner, architect and/or the owner's agent. ATAS International, Inc. cannot be held responsible for the ultimate selection or the installation of those materials. Due to slight stresses created by a variety of conditions, from atmospheric to installation, the panel may have a wavy appearance (oil canning) after installation. The greater the flat area of the panel, the greater is the potential for slight imperfections to be noticed. This condition is beyond ATAS International's control, consequently, oil canning or distortion of the product is not a valid reason for rejection of the materials. (Refer to ASTM E-1514 and ASTM E-1637.) ATAS reserves the right to modify, eliminate and/or change its products without prior notification.