



006-104255

346 Chambers Sledge Rd

2. Name of Owner in Fee: BLICK SD OF ED Tel. (337) 262-2626

3. Ownership in fee: Public _____ Private _____

4. Principal Contractor: DENSMY LOAST fine Tel. (732) 938 2070

Address 327 ASBURY ROAD FARMINGDALE NY

License No. OR, if new home, Builder Reg. No. 100206 Exp. Date 10/06

Federal Employee No. _____ FAX: (____) _____

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

Address	Contact
---------	---------

6. Responsible Person in Charge once Work has Begun AL FEECE

Tel. 722-938 2000 FAX: 722-938 7751

Update

~~clear~~

(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 _____

OPTIONAL (for office use only)[illegible]

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 _____

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

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

1. ☐ Elevators/Escalators/Lifts/
Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels

4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers

8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

I personally prepared the plans submitted for: 1) the new home referred to in A., or, 2) an addition, alteration, renovation, or repair to an existing single family residence owned and occupied by myself and located on the property listed on Page 1; or, 3) a new structure that will be physically separate from, but that will be deemed part of, an existing single family residence that is owned and occupied by myself and located on the property listed on Page 1

C. ☐ I further certify that I will perform or supervise the following work:

C.1. ☐ Building C.2. ☐ Fire Protection

I further certify that I will perform the following work:

C.3. ☐ Electrical C.4. ☐ Plumbing

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

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

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

Signature _____ Date _____

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

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(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 DANIEL COAST FIRE EQUIPMENT

Address 377 ABINGY ROAD

HAMMONT NJ 07021

Telephone (908) 938 2020

Signature [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			X		X		X		
☐ Planning Board			X		X		X		
☐ Zoning Board			X		X		X		
☐ Sewer Authority			X		X		X		
☐ Water Authority			X		X		X		
☐ Police Department			X		X		X		
☐ Health Department			X		X		X		
☐ Soil Conservation			X		X		X		
☐ N.J. Department of Community Affairs			X		X		X		
☐ N.J. Department of Transportation			X		X		X		
☐ N.J. Department of Environmental Protection			X		X		X		
☐ Utility Dig No.			X		X		X		
☐									
☐									

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

Name of Code & Edition	Name of Code & Edition
Building _____	Energy _____
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. _____	_____	_____	_____



CONSTRUCTION PERMIT

Date Issued 09/08/2006
Control # C-06-104255
Permit # 06-2952

IDENTIFICATION Block: 701.39 Lot: 12 Qualifier
Work Site Location: 346 CHAMBERS BRIDGE RD. Brick Township, NJ Contractor JERSEY COAST FIRE EQUIP
Address 377 ASBURY RD. HOWELL NJ 07731-
Owner in Fee BRICK TOWNSHIP EDUCATION
Address 101 HENDRICKSON AVE. BRICK NJ 08723 Telephone: 732/938-2020
Lic. No. or Bids. Reg. No.
Telephone: (732) 262-2626 Federal Employee. No. 22-2699591

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:

FIRE ALTERATIONS

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 \$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 \$0
Electrical \$0
Plumbing \$0
Fire Protection \$0
Elevator Devices \$0
Other \$0.00
DCA Training Fee \$0
CO Fee
Other \$0
Total \$0
Check No.
Cash \$0
Credit \$0
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 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.



PERMIT UPDATE

Date Update Issued 09/08/2006
Control # C-06-104255+A
Permit # 06-2952+A

IDENTIFICATION Block: 701.39 Lot: 12 Qualifier
Work Site Location: 346 CHAMBERS BRIDGE RD. Brick Township, NJ Contractor JERSEY COAST FIRE EQUIP
Address 377 ASBURY RD HOWELL NJ 07731-
Owner in Fee BRICK TOWNSHIP EDUCATION
Address 101 HENDRICKSON AVE. BRICK NJ 08723 Telephone: 732/938-2020
Lic. No. or Bldrs. Reg. No.
Telephone: (732) 262-2626 Federal Employee No. 22-2699591

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:

FIRE ALTERATIONS ADDITIONAL TANK NOZZLE

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 \$1,200

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	\$0
Electrical	\$0
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$0
CO Fee	
Other	\$0
Total	\$0
Check No.	
Cash	\$0
Credit	\$0
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 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.



FIRE PROTECTION SUBCODE TECHNICAL SECTION

UP DATE

ATTN RETURN



Date Received
Control #

Date Issued
Permit #

9/8/04
06-29524

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

Block 701.39 Lot 12 Qualification Code 346 Chambers

Work Site Location Brick High School

Owner in Fee Brick Board of Ed

Address 101 Hudson Ave

Tel (732) 260-2626

Contractor Brick Board of Ed Maintenance Dept

Address _____

Tel _____

FAX _____

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 \$ 500.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required:

[] Building [] Plumbing

[] Electric [] Elevator

[] Fire Plans Approved

Date: 8-3-04

Approved by: [Signature]

SUBCODE ABEROVAL

[] CO [] SGO [] CA

Date: 12-11-05

Approved by: [Signature]

INSPECTIONS

Type: _____

Alarm System _____

Suppression Sys. _____

Standpipe _____

Fire Pump _____

Pre-Eng. System _____

Mechanical _____

Smoke Control _____

TCO _____

Flam/Combust Tanks _____

Fireplace Venting _____

Final _____

Other _____

Dates (Month/Day)

Failure _____

Approval _____

Initial _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Replaced old Appliance

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) _____

Supervisory Devices (i.e., tamper, low/high air) _____

Signaling Devices (i.e., horns/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 (M 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)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy



FIRE PROTECTION 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 101-301 Lot 12 Qualification Code 01

Work Site Location BAICK TWP HIGH SCHOOL

Owner in Fee BAICK RD OF ED

Address 100 WILKESON AVE

Tel (732) 362-3631

Contractor JENSEN CONST FINE EQUIP

Address 327 ASAULEY RD

Tel (732) 438-2020 FAX (732) 435-7751

Fire Protection Equipment, NJ Div of Fire Safety Permit No. 100206

Fire Alarm Contractor No. 100206

Federal Emp. No. 100206

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present Proposed Fire Alarm System: 1 New or 1 Existing

Constr. Class: Present Proposed Location of Panel: 1

Heating System: 1 New or 1 Existing 1 HVAC Fire Suppression/Standpipe System:

Type: 1 Gas 1 Oil 1 Electric 1 Solar Location of Main Control Valve: 1

Location: 1 Other

Fuel Storage Tank:

Fuel Type: 1 Flammable or 1 Combustible Capacity 1000.00

Total Cost of Fire Protection Work \$ 1000.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

1 No Plans Required

Joint Plan Review Required:

1 Building 1 Plumbing

1 Electric 1 Elevator

Fire Plans Approved

Date: 8-20-06

Approved by: [Signature]

SUBCODE APPROVAL

1 CO 1 GCG 1 CA

Date: 8-21-06

Approved by: [Signature]



C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of (hold and authorized) to make this application. [Signature]

Applicant's Signature/Contractor's Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

ADDITONAL TANK + NOZZLES

Water Supply Source 1

Method of Alarm/Suppression System Supervision 1

Flammable/Combustible Tanks

Alarm Systems

1 System

1 110V Interconnected

1 CO Detectors/110V

Alarm Devices (i.e., smoke, heat, pulls, water/flow)

Supervisory Devices (i.e., tamper, low/high air)

Signaling Devices (i.e., horns/strobes, bells)

Other Devices 1

TOTAL

Suppression Systems

Fire Pump 1 GPM Type 1

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 1

Other Systems

Kitchen Hood Exhaust System

Smoke Control System

Fired Appliances 1 Gas or 1 Oil

Fireplace Venting/Metal Chimney

Other 1

Administrative Surcharge \$

Minimum Fee \$

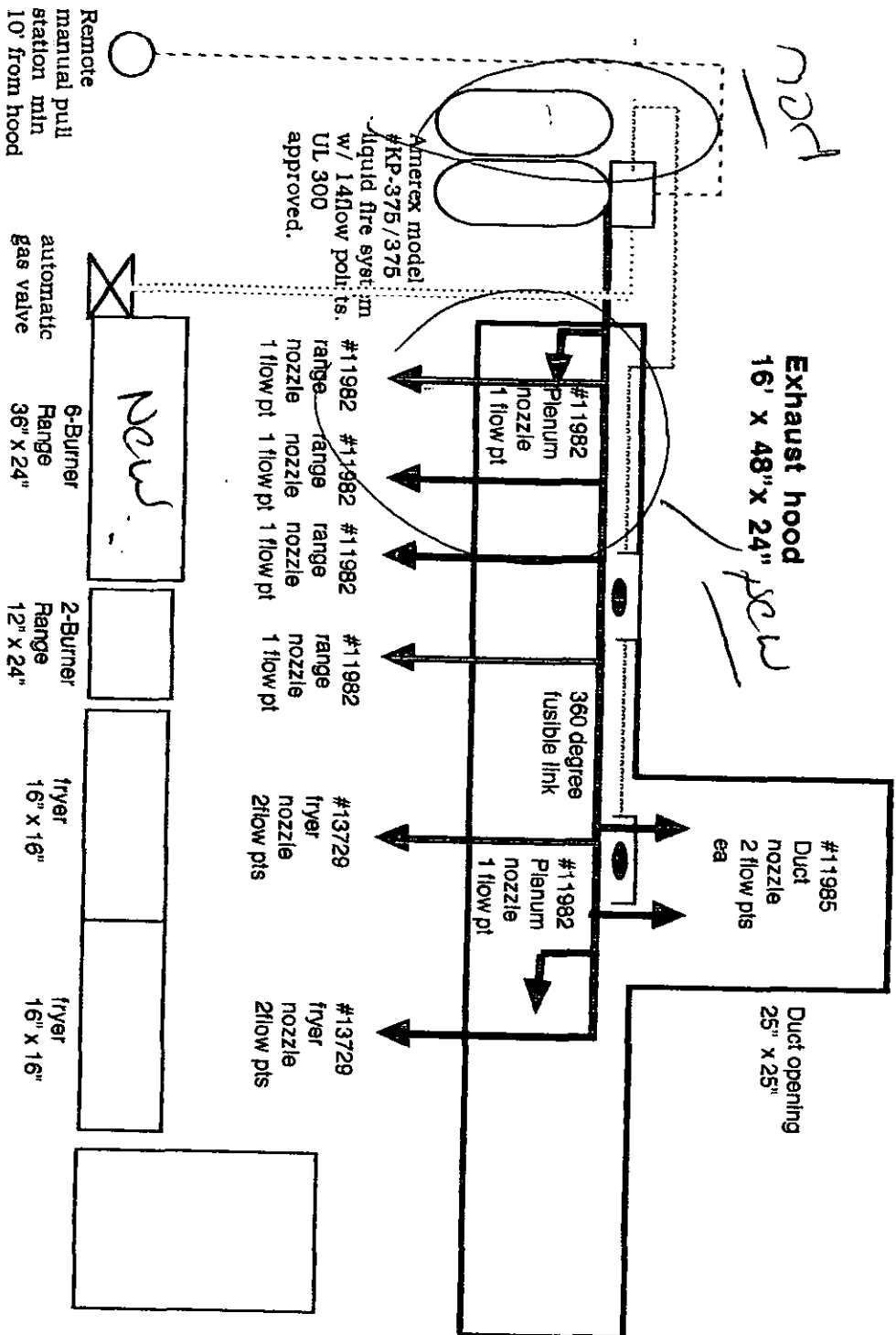
State Permit Surcharge Fee \$

TOTAL FEE \$

U.C.C. F140
(rev. 1/04)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy



Customer:
 Brick twp. High School
 346 Chambersbridge Rd.
 Brick, NJ 08723
 Drwn: 8/29/06 J.R. -

Contractor:
 Jersey Coast Fire Equipment
 377 Asbury Road
 Farmingdale, N.J. 07727
 (732) 938-2020
 Lic # P00206



300 SERIES RESTAURANT RANGE

6 Open Burners, Single Oven

Standard Features

- 26,000 BTU NAT (20,000 BTU LP) Burners
- 6 clog-free, cast iron burners
- Stainless steel front and shelf
- Galvanized sides
- Removable cast iron, flush-top grates
- Single-piece drip tray under burners
- Heat resistant door handle
- Commercial gas range 36.5" wide with a 37" cooking top (including 6" high adjustable legs)
- Hinged lower valve panel
- 90 Day Parts and Labor Warranty

Griddle (1G)

- 12" griddle with 1/2" polished steel plate -32,000 BTU (NAT or LP)

Standard Oven (D Suffix)

- 32,000 BTU NAT (30,000 BTU LP)
- Large 28" wide x 26 1/2" deep oven -full sheet pans fit both ways
- Single rack per oven
- Equipped with a flame safety device
- Thermostat range from 250°-500°F (121°-260°C) with low setting

Convection Oven (A Suffix)

- 30,000 BTU (NAT or LP)
- Three racks per oven
- Full size sheet pan fits left to right
- Energy efficient flue design
- Manual pilot ignition, enamel bottom and door linings
- On/Off switch to allow CO base to operate as Standard oven

Standard Oven
336D/336D-1G

Convection Oven
336A/336A-1G



(shown with optional casters)

STANDARD CONSTRUCTION SPECIFICATIONS

Exterior Finish: Stainless steel front and shelf standard. Galvanized sides.

Range Top: 6 -26,000 BTU NAT (20,000 BTU LP) cast iron non-clogging burners (4-26,000 burners with the 12" griddle option) Removable flush top grates. Center-to-center measurements between burners not less than 12", side-to-side or front-to-back. Removable one piece drip tray provided under burners.

Griddle (1G): Smooth, polished, 1/2" thick steel plate with raised sides, 12" wide x 29 3/4" deep.

Back Shelf: Rigid, single deck stainless steel.

Interior: Cavity sides, top and back -aluminized steel. Oven bottom and door lining porcelain enamel finish. Four sides and top of oven insulated with heavy, self-supporting block type rock wool with oven baffle assembly constructed of Alumina-Ti steel.

Door: Constructed with heavy duty hinges and unbreakable

quadrants and heat resistant handle.

Legs: 6" black, adjustable

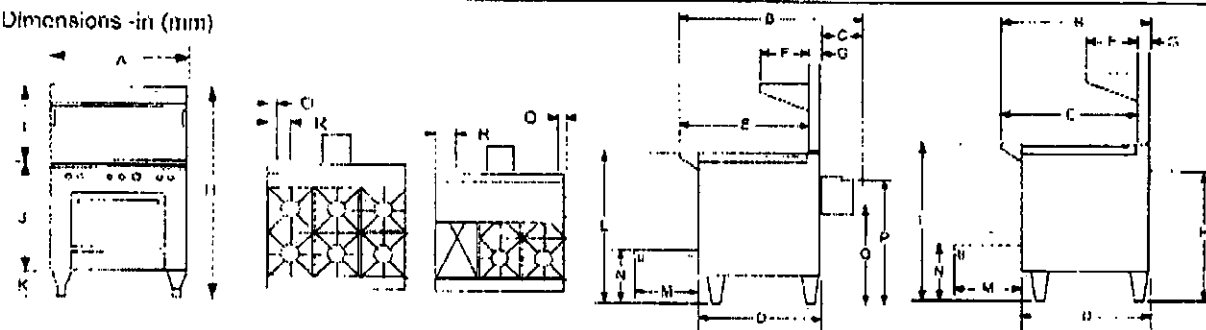
Model 336D: 32,000 BTU NAT (30,000 BTU LP) with thermostat range of 150°F to 500°F. Porcelain enamel interior, measuring 14" high x 26" wide x 26.5" deep. Two position rack guides with one removable rack. Oven thermostat temperature type adjustable for 250°F to 500°F. Factory installed pressure regulator.

Model 336A: 30,000 BTU (NAT or LP) convection oven thermostat range of 150°F to 500°F. Porcelain enamel interior, measuring 14" high x 26" wide x 24" deep. Three racks with 5-position side rails. Two-speed, 1/3 hp blower motor mounted to rear -serviceable from front. Gas Control System: Includes pressure regulator, flame switch safety, pilot filter, pilot adjustment, and manual oven surface shut-off valve.



Models: ☐ 336D ☐ 336A ☐ 336D-1G ☐ 336A-1G

Dimensions - in (mm)



MODEL	Front											Cook Top	Door Opening	Oven Bottom	3/4" Gas Conn		Electric	
	Width A	Depth B	C	D	E	F	G	H	I	J	K				L	M	N	O
336D 336D-1G	30 1/2" (777)	34" (864)	-	31.25" (798)	31" (787)	17" (430)	2 7/8" (70)	59.6" (1511)	22.75" (587)	30.75" (787)	6" (152)	37" (914)	16 5/8" (424)	13 0/8" (330)	2 5/8" (64)	30 25/32" (768)	-	-
336A 336A-1G	36 1/2" (927)	47 25/32" (1204)	8" (203)	31.25" (798)	29 5/16" (747)	17" (430)	2 7/8" (70)	59.6" (1511)	22.75" (587)	30.75" (787)	6" (152)	37" (914)	15 5/8" (394)	13 0/8" (330)	2 5/8" (64)	30 25/32" (768)	24" (610)	6" (152)

MODEL	OVEN INTERIOR			BURNER (6 BTU each)			CRATE SIZE			CUBIC VOLUME	CRAFTER WEIGHT
	Width	Depth	Height	Open	Oven	Griddle (1G only)	Width	Depth	Height		
336D 336D-1G	28" (711)	26 1/2" (673)	14" (354)	8 (25,000) 4 (25,000)	1 (32,000)	2 (16,000)	44" (1118)	45 1/2" (1156)	48" (1219)	55.8 cu ft (1.58 cu m)	317 lbs (144 kg)
336A 336A-1G	28 1/2" (726)	24 0/8" (610)	14 2/5" (362)	6 (25,000) 4 (25,000)	1 (30,000)	2 (16,000)	44" (1118)	45 1/2" (1156)	48" (1219)	55.8 cu ft (1.58 cu m)	335 lbs (152 kg)

NOTES:

- 1 Dimensions C on Model 336A; 336A-1G includes 2" minimum clearance between motor and wall
- 2 Optional Hot Plate in lieu of 2 open top burners at 12,000 BTU/burner (24,000 BTU total)

*All dimensions are nominal

UTILITY INFORMATION

Models: 336D; 336A GAS:

- 336D Total BTU NAT: 188,000, LP: 150,000
- 336A Total BTU NAT: 186,000, LP: 150,000
- 336D-1G Total BTU NAT: 168,000, LP: 142,000
- 336A-1G Total BTU NAT: 166,000, LP: 142,000
- Required minimum inlet pressure:
 - Natural gas 4" W.C.
 - Propane gas 10" W.C.
- Pressure regulator is supply with unit
- Required supply line size to the regulator is 3/4" NPT.

ELECTRICAL: (336A Only)

- Standard -115/60/1 furnished with 6' cord with 3-prong plug. Total max amps 4.8
- Optional -208/60/1 or 3 phase (190 to 219 volts). Supply must be wired to junction box with terminal block located in rear. Total max amps 2.6
- Optional -230/60/1 or 3 phase (220 to 240 volts). Supply must be wired to junction box with terminal block located in rear. Total max amps 2.5

MISCELLANEOUS

- If using Flex-Hose, the I.D. should not be smaller than 3/4" and must comply with ANSI Z 21.69
- If casters are used with flex hose, a restraining device should be used to eliminate undue strain on the flex hose
- For installation on combustible floors (with 6" high legs) and adjacent to combustible walls, allow 6" clearance
- Install under vented hood
- Check local codes for fire, installation and sanitary regulations

NOTICE:

Southbend has a policy of continuous product research and improvement. We reserve the right to change specifications and product design without notice. Such revisions do not entitle the buyer to corresponding changes, improvements, additions or replacements for previously purchased equipment.

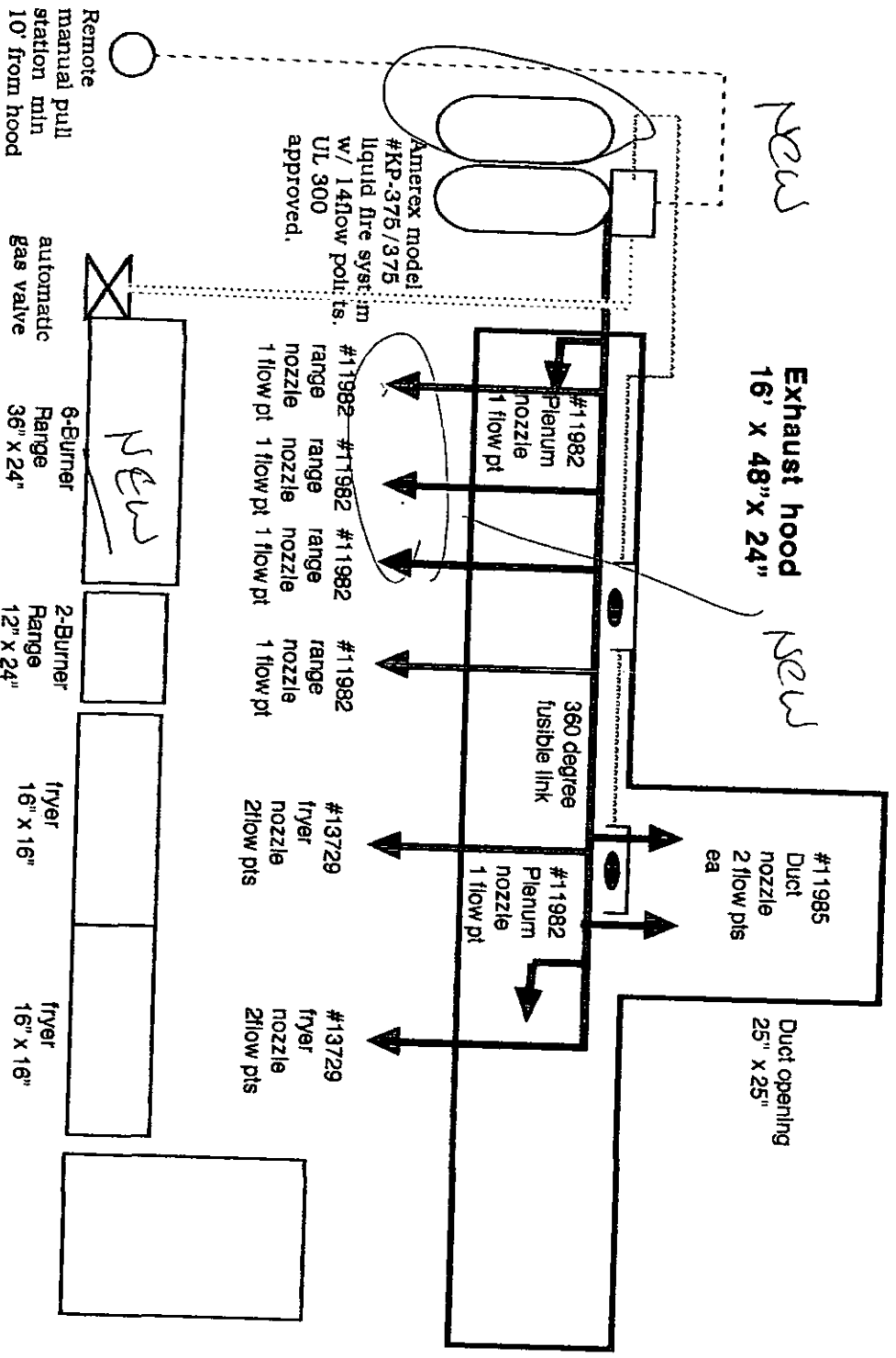
OPTIONS AND ACCESSORIES

- ☐ 10' Flue Riser
- ☐ 3/4" quick disconnect with flexible hose complies with ANSI Z 21.69 (specify 3ft, 4ft, 5ft)
- ☐ Casters all swivel-front with locks
- ☐ Hot top plates - each plate replaces 2 Open burner section
- ☐ Various salamander & cheesemelter mounts available. (Please refer to the price list)
- ☐ Auxiliary griddle plates
- ☐ Extra Oven Racks
- ☐ Stainless steel body sides

INTENDED FOR COMMERCIAL USE ONLY.
NOT FOR HOUSEHOLD USE.



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 Drwn: 8/29/06 J.R.

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