

BLOCK 380 LOT 13 QUALIFICATION CODE _____

ADDRESS (SITE) _____

171 BEAVERSON BLVD

LAKE RIVERA MIDDLE SCHL

PERMIT NO.

05-0148CONSTRUCTION PERMIT
APPLICATION

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

I. IDENTIFICATION

1. Proposed Work Site at: LAKE RIVERA MIDDLE SCHOOL

2. Name of Owner in Fee: BRICK TWP. BOARD OF ED Tel. (732) 85-3000
Address 101 HENRICKSON AVE BRICK NJ 08724
street municipality zip code

3. Ownership in fee: Public ☒ Private ☐

4. Principal Contractor: NETQ MULTIMEDIA CO. Tel. (732) 833-9300
Address PO Box 1092 JACKSON NJ 08521
License No. OR, if new home, Builder Reg. No. EXEMPT. Exp. Date _____
Federal Employee No. 22-2871520 FAX: (732) 833-1300

5. Architect or Engineer _____ Tel. (_____) _____
Address _____ Contact _____

6. Responsible Person in Charge once Work has Begun PAUL O'NEILL
Tel. (732) 833-9300 X101 FAX: (732) 833-1300

Communication Points

OPTIONAL (for office use only)

II. PROPOSED WORK	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
1. ☐ Minor Work		<u>DM</u>	<u>1-5-05</u>						
2. ☐ New Building									
3. ☐ Addition									
4. ☐ a. Repair									
☐ b. Alteration									
☐ c. Renovation									
☐ d. Reconstruction									
5. ☐ Fire Protection									
6. ☐ Plumbing									
7. ☒ Electrical <u>DATA COM</u>					<u>1-12-05</u>	<u>DM</u>	<u>3-6-05</u>		
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS									

III. DO YOU WANT: (optional)

1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/
Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs

V. FEE SUMMARY (for office use only)

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

VI. BUILDING/SITE CHARACTERISTICS

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

(office use only)

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. State Specific Use: _____
2. Use Group: _____
3. Change in Use Group, Indicate Former: _____
4. No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

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



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 03/12/2008
Control Number C-05-131395
Permit Number 05-0148
Permit Issue Date 01/18/2005
Certificate Number 05-0148

Certificate

Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 171 BEAVERSON BLVD. Brick Township, NJ Block: 380 Lot: 13 Qual: _____
Owner in Fee: BRICK TOWNSHIP BOARD OF EDUCATION
Owner Address: 101 HENDRICKSON AVE. BRICK NJ 08723
Telephone: _____
Contractor Net Q Multimedia Co
Address PO Box 1092 Jackson NJ 08527
Telephone: (732) 833-9300 Fax: _____
License Number or Builders Registration Number: _____ Federal Emp. Number: 222871520

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: COMMUNICATION POINTS

Certificate Comments:

☐ **Certificate of Occupancy**

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

☒ **Certificate of Approval**

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

☐ **Certificate of Continued Occupancy**

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

☐ **Temporary Certificate of Compliance**

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

☐ **Certificate of Clearance - Lead Abatement 5:17**

This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

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

☐ **Certificate of Clearance - Asbestos Abatement**

This serves notice that based on written certification, asbestos abatement was performed to the following extent.

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

☐ **Certificate of Compliance**

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

☐ **Temporary Certificate of Occupancy**

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

Construction Official

Fee: \$0.00

Check Number: _____

Collected By: _____



CONSTRUCTION PERMIT

Date Issued 1/18/2005
Control # C-05-131395
Permit # 05-0148

IDENTIFICATION Block: 380 Lot: 13 Qualifier _____
Work Site Location: 171 BEAVERSON BLVD. Brick Township, NJ Contractor Net Q Multimedia Co
Address PO Box 1092 Jackson NJ 08527
Owner in Fee BRICK TOWNSHIP BOARD OF EDUCATION
Address 101 HENDRICKSON AVE. BRICK NJ 08723 Telephone: (732) 833-9300
Lic. No. or Bldrs. Reg. No. _____
Federal Employee No. 222871520

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:

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 \$130,000

Construction Official

1/18/2005
Date

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

INSPECTOR COPY

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	



ELECTRICAL SUBCODE TECHNICAL SECTION

Box 10



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

C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the (agent of) owner of the record and am authorized to make this application and perform the work listed on this application.

Date Received 01/07/2005
Date Issued 12/31/2005
Control # C-05-131395
Permit # 05-0148

Block 380 Lot 13 Qualification Code

Work Site Location: 171 BEAVERSON BLVD.

Owner in Fee: BRICK TOWNSHIP BOARD OF EDUCATION

Address 101 HENDRICKSON AVE. BRICK NJ

Tel. _____

Contractor: Net Q Multimedia Co

Address PO Box 1092 Jackson NJ

Tel. (732) 833-9300 Fax. _____

Lic No. _____

Federal Employee No. _____

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed R-5 _____

☐ Pole/Pad # _____ ☐ Temporary ☐ Other _____

Building Occupied as _____ Utility Co. _____

Estimated Cost of Electrical Work \$130,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

☒ No Plan Required

☐ Joint Plan Review Required

☐ Building ☐ Plumbing

☐ Fire ☐ Elevator

☐ Electrical Plans Approved

Date: 1/2/05

Approved by: [Signature]

Final Service

Barrier-Free

Temp. Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding

Approved by: [Signature]

INSPECTIONS

Type: Rough _____ Failure _____ Dates (Month/Day) Approval _____ Initial _____

Barrier-Free

Trench

Joint Serv.

Const. Serv.

Partic. Serv.

TCO

Other

Service

Final

Barrier-Free

Temp. Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding

Certification

Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Elec Contr ☐ Cert'd Landscape Irrigation Contr ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY. SIZE

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors - Fract. HP

Emergency & Exit Lights

Communication Points

Alarm Devices/F.A.C. Panel

0

650

0

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TOTAL NUMBERS

Pool Permit/with UV Lights

Storable Pool/Spa/Hot Tub

KW Elec. Range/Receptical

KW Oven/Surface Unit

KW Elec. Water Heater

KW Elec. Dryer/Recepticle

KW Dishwasher

PH Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air

KW Baseboard Heat

HP Motors 1/4 HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

0

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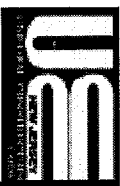
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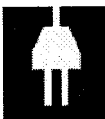
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ELECTRICAL SUBCODE TECHNICAL SECTION



13

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

C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the (agent of) owner of the record and am authorized to make this application and perform the work listed on this application.

Date Received 01/07/2005
Date Issued 12/31/89 11/18/05
Control # C-05-131395
Permit # 05-0148

Block 380 Lot 13 Qualification Code

Work Site Location: 171 BEAVERSON BLVD.

Owner in Fee: BRICK TOWNSHIP BOARD OF EDUCATION

Address 101 HENDRICKSON AVE. BRICK NJ

Tel. Contractor: Net Q Multimedia Co

Address PO Box 1092 Jackson NJ

Tel. (732) 833-9300 Fax.

Lic No. Federal Employee No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-5

Pole/Pad # Temporary Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work \$130,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW

No Plan Required

Joint Plan Review Required

Building Plumbing

Fire Elevator

Electrical Plans Approved

Date: 1/20/05

Approved by: W

INSPECTIONS

Type: Rough Failure Failure Approval Initial

Barrier-Free

Trench

Temp. Serv.

Constr. Serv.

Date: 3/6/08

Other

Service

Final

Barrier-Free

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

Applicant's Signature/Contractor's Seal and Signature
D. TECHNICAL SITE DATA
Licensed Elec Contr Cert'd Landscape Irrigation Contr Exempt Applicant

QTY. SIZE

ITEMS

FEE (Office Use Only)

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors - Fract. HP

Emergency & Exit Lights

Communication Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UW Lights

Storable Pool/Spa/Hot Tub

KW Elec. Range/Receptical

KW Oven/Surface Unit

KW Elec. Water Heater

KW Elec. Dryer/Recepticle

KW Dishwasher

PH Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air

KW Baseboard Heat

HP Motors 1/+ HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elec. Sign/Outline Light

Administrative Surcharge

Minimum Fee

State Permit Surcharge Fee

TOTAL FEE

Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

**LINKWARE**

CABLE TEST MANAGEMENT SOFTWARE

171-Beverly Blvd

**Cable ID: BB 1****Test Summary: PASS**

Date / Time: 09/22/2005 03:31:35pm

Headroom: 6.3 dB (NEXT 12-36)

Test Limit: TIA Cat 6 Perm. Link

Cable Type: Cat 6 UTP

Operator: LOU GLIATTA

Software Version: 1.1000

Limits Version: 1.0002

NVP: 69.0%

Model: DTX-1800

Main S/N: 8713017

Remote S/N: 8713018

Main Adapter: DTX-PLA001

Remote Adapter: DTX-PLA001

Wire Map (T568A)	1 2 3 4 5 6 7 8
PASS	
	1 2 3 4 5 6 7 8



Length (ft), Limit 295	[Pair 78]	293
Prop. Delay (ns), Limit 498	[Pair 45]	456
Delay Skew (ns), Limit 44	[Pair 45]	24
Resistance (ohms)		N/A
Attenuation (dB)	[Pair 45]	1.1
Frequency (MHz)	[Pair 45]	250.0
Limit (dB)	[Pair 45]	31.1

Worst Case Margin			Worst Case Value	
PASS	MAIN	SR	MAIN	SR
Worst Pair	12-36	12-36	12-36	12-36
NEXT (dB)	7.4	6.3	8.6	7.8
Freq. (MHz)	8.4	8.4	250.0	238.0
Limit (dB)	59.0	59.0	35.3	35.7
Worst Pair	12	12	12	12
PSNEXT (dB)	8.4	7.8	9.8	9.4
Freq. (MHz)	8.3	8.5	250.0	238.0
Limit (dB)	56.8	56.6	32.7	33.1

PASS	MAIN	SR	MAIN	SR
Worst Pair	36-45	36-45	78-45	78-12
ELFEXT (dB)	10.5	10.6	17.4	17.3
Freq. (MHz)	1.0	1.0	249.5	244.5
Limit (dB)	64.2	64.2	16.2	16.4
Worst Pair	45	45	78	78
PSELFEXT (dB)	12.5	12.7	18.2	17.4
Freq. (MHz)	1.0	1.0	250.0	249.5
Limit (dB)	61.2	61.2	13.2	13.2

N/A	MAIN	SR	MAIN	SR
Worst Pair	12-36	12-36	12-36	12-36
ACR (dB)	7.8	6.7	10.2	9.3
Freq. (MHz)	8.4	8.4	250.0	238.0
Limit (dB)	54.0	54.0	4.2	5.5
Worst Pair	12	12	12	12
PSACR (dB)	8.7	8.1	11.2	10.9
Freq. (MHz)	8.3	8.5	250.0	238.0
Limit (dB)	51.8	51.5	1.6	2.8

PASS	MAIN	SR	MAIN	SR
Worst Pair	45	45	78	78
RL (dB)	5.9	4.4	9.8	4.6
Freq. (MHz)	3.4	3.3	217.0	128.5
Limit (dB)	21.0	21.0	10.6	12.9

Compliant Network Standards:

10BASE-T

100BASE-TX

100BASE-T4

1000BASE-T

ATM-25

ATM-51

ATM-155

100VG-AnyLan

TR-4

TR-16 Active

TR-16 Passive

Project: LAKE RIVIERA

Site: BRICK SCHOOL

Brick Lake Riv.flw

FLUKE
networks

Cable ID: BB 10

Date / Time: 09/22/2005 03:44:54pm
Headroom: -5.0 dB (NEXT 45-78)
Test Limit: TIA Cat 6 Perm. Link
Cable Type: Cat 6 UTP

Operator: LOU GLIATTA
Software Version: 1.1000
Limits Version: 1.0002
NVP: 69.0%

Test Summary: FAIL

Model: DTX-1800
Main S/N: 8713017
Remote S/N: 8713018
Main Adapter: DTX-PLA001
Remote Adapter: DTX-PLA001

Wire Map (T568A)	1 2 3 4 5 6 7 8
PASS	
	1 2 3 4 5 6 7 8



Length (ft), Limit 295	[Pair 36]	302
Prop. Delay (ns), Limit 498	[Pair 12]	455
Delay Skew (ns), Limit 44	[Pair 12]	10
Resistance (ohms)		N/A
Attenuation (dB)	[Pair 45]	-2.4 F
Frequency (MHz)	[Pair 45]	250.0
Limit (dB)	[Pair 45]	31.1

	Worst Case Margin		Worst Case Value	
FAIL	MAIN	SR	MAIN	SR
Worst Pair	45-78	45-78	45-78	36-78
NEXT (dB)	-5.0 F	-1.6 F	-5.0	2.1
Freq. (MHz)	190.0	101.5	190.0	226.5
Limit (dB)	37.3	41.7	37.3	36.0
Worst Pair	78	45	78	12
PSNEXT (dB)	-2.8 F	-0.5 F	-2.1	2.2
Freq. (MHz)	190.0	93.0	237.5	219.0
Limit (dB)	34.7	39.8	33.1	33.7

PASS	MAIN	SR	MAIN	SR
Worst Pair	36-45	36-45	36-45	78-12
ELFEXT (dB)	8.6	9.2	9.1	10.2
Freq. (MHz)	203.5	155.0	246.5	250.0
Limit (dB)	18.0	20.4	16.4	16.2
Worst Pair	45	36	45	12
PSELFEXT (dB)	8.8	9.2	9.6	10.4
Freq. (MHz)	174.0	1.6	250.0	250.0
Limit (dB)	16.4	57.0	13.2	13.2

N/A	MAIN	SR	MAIN	SR
Worst Pair	45-78	45-78	36-78	45-78
ACR (dB)	-6.6	-2.9	-4.5	1.9
Freq. (MHz)	190.0	101.5	238.0	249.5
Limit (dB)	10.7	23.0	5.5	4.3
Worst Pair	45	45	78	78
PSACR (dB)	-4.4	-2.0	-3.9	2.1
Freq. (MHz)	190.0	93.0	237.5	249.5
Limit (dB)	8.1	22.0	2.9	1.7

PASS	MAIN	SR	MAIN	SR
Worst Pair	36	36	36	45
RL (dB)	4.1	3.4	5.6	5.6
Freq. (MHz)	2.6	80.0	172.0	250.0
Limit (dB)	20.8	15.0	11.6	10.0

**LINKWARE**

CABLE TEST MANAGEMENT SOFTWARE

**Cable ID: BB 11****Test Summary: FAIL**

Date / Time: 09/22/2005 03:45:16pm

Headroom: -5.0 dB (NEXT 45-78)

Test Limit: TIA Cat 6 Perm. Link

Cable Type: Cat 6 UTP

Operator: LOU GLIATTA

Software Version: 1.1000

Limits Version: 1.0002

NVP: 69.0%

Model: DTX-1800

Main S/N: 8713017

Remote S/N: 8713018

Main Adapter: DTX-PLA001

Remote Adapter: DTX-PLA001

Wire Map (T568A)	1 2 3 4 5 6 7 8
PASS	
	1 2 3 4 5 6 7 8



Length (ft), Limit 295	[Pair 36]	302
Prop. Delay (ns), Limit 498	[Pair 12]	455
Delay Skew (ns), Limit 44	[Pair 12]	10
Resistance (ohms)		N/A

Attenuation (dB)	[Pair 45]	-2.4 F
Frequency (MHz)	[Pair 45]	250.0
Limit (dB)	[Pair 45]	31.1

	Worst Case Margin		Worst Case Value	
FAIL	MAIN	SR	MAIN	SR
Worst Pair	45-78	45-78	45-78	36-78
NEXT (dB)	-5.0 F	-1.6 F	-5.0	2.1
Freq. (MHz)	190.0	101.5	190.0	226.5
Limit (dB)	37.3	41.7	37.3	36.0
Worst Pair	78	45	78	12
PSNEXT (dB)	-2.8 F	-0.5 F	-2.1	2.2
Freq. (MHz)	190.0	93.0	237.5	219.0
Limit (dB)	34.7	39.8	33.1	33.7

PASS	MAIN	SR	MAIN	SR
Worst Pair	36-45	36-45	36-45	78-12
ELFEXT (dB)	8.6	9.2	9.1	10.2
Freq. (MHz)	203.5	155.0	246.5	250.0
Limit (dB)	18.0	20.4	16.4	16.2
Worst Pair	45	36	45	12
PSELFEXT (dB)	8.8	9.2	9.5	10.5
Freq. (MHz)	174.0	1.1	246.5	249.5
Limit (dB)	16.4	60.2	13.4	13.2

N/A	MAIN	SR	MAIN	SR
Worst Pair	45-78	45-78	36-78	45-78
ACR (dB)	-6.6	-2.9	-4.5	1.9
Freq. (MHz)	190.0	101.5	238.0	249.5
Limit (dB)	10.7	23.0	5.5	4.3
Worst Pair	45	45	78	78
PSACR (dB)	-4.4	-2.0	-3.9	2.1
Freq. (MHz)	190.0	93.0	237.5	249.5
Limit (dB)	8.1	22.0	2.9	1.7

PASS	MAIN	SR	MAIN	SR
Worst Pair	36	36	36	45
RL (dB)	4.1	3.4	5.6	5.6
Freq. (MHz)	2.6	80.0	172.0	250.0
Limit (dB)	20.8	15.0	11.6	10.0

Project: LAKE RIVIERA
 Site: BRICK SCHOOL

Brick Lake Riv.flw

FLUKE
 networks



Cable ID: BB 12

Test Summary: **FAIL**

Date / Time: 09/22/2005 03:45:37pm

Headroom: -5.0 dB (NEXT 45-78)

Test Limit: TIA Cat 6 Perm. Link

Cable Type: Cat 6 UTP

Operator: LOU GLIATTA

Software Version: 1.1000

Limits Version: 1.0002

NVP: 69.0%

Model: DTX-1800

Main S/N: 8713017

Remote S/N: 8713018

Main Adapter: DTX-PLA001

Remote Adapter: DTX-PLA001

Wire Map (T568A)	1 2 3 4 5 6 7 8
PASS	
	1 2 3 4 5 6 7 8



Length (ft), Limit 295	[Pair 36]	302
Prop. Delay (ns), Limit 498	[Pair 12]	455
Delay Skew (ns), Limit 44	[Pair 12]	10
Resistance (ohms)		N/A

Attenuation (dB)	[Pair 45]	-2.4 F
Frequency (MHz)	[Pair 45]	250.0
Limit (dB)	[Pair 45]	31.1

	Worst Case Margin		Worst Case Value	
FAIL	MAIN	SR	MAIN	SR
Worst Pair	45-78	45-78	45-78	36-78
NEXT (dB)	-5.0 F	-1.6 F	-5.0	2.1
Freq. (MHz)	190.0	101.5	190.0	226.5
Limit (dB)	37.3	41.7	37.3	36.0
Worst Pair	78	45	78	12
PSNEXT (dB)	-2.8 F	-0.5 F	-2.1	2.2
Freq. (MHz)	190.0	93.0	237.5	219.0
Limit (dB)	34.7	39.8	33.1	33.7

PASS	MAIN	SR	MAIN	SR
Worst Pair	36-45	36-45	36-45	78-12
ELFEXT (dB)	8.6	9.1	9.1	10.2
Freq. (MHz)	203.5	155.5	246.5	250.0
Limit (dB)	18.0	20.4	16.4	16.2
Worst Pair	45	36	45	12
PSELFEXT (dB)	8.8	9.1	9.4	10.5
Freq. (MHz)	174.0	2.0	246.5	249.5
Limit (dB)	16.4	55.2	13.4	13.2

N/A	MAIN	SR	MAIN	SR
Worst Pair	45-78	45-78	36-78	45-78
ACR (dB)	-6.6	-2.9	-4.5	1.9
Freq. (MHz)	190.0	101.5	238.0	249.5
Limit (dB)	10.7	23.0	5.5	4.3
Worst Pair	78	45	78	78
PSACR (dB)	-4.4	-2.0	-3.9	2.1
Freq. (MHz)	190.0	93.0	237.5	249.5
Limit (dB)	8.1	22.0	2.9	1.7

PASS	MAIN	SR	MAIN	SR
Worst Pair	36	36	36	45
RL (dB)	4.1	3.4	5.6	5.6
Freq. (MHz)	87.5	80.0	172.0	250.0
Limit (dB)	14.6	15.0	11.6	10.0

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 NetQ Multimedia Co.

Address Po Box 1092 Jackson NJ 08527

Telephone (732) 833-9300

Signature [Signature]

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