BLOCK 835 LOT 1 QUALIFICATION CODE ADDRESS (SITE) 1684 W. Princeton Ave. PERMIT NO. 17-2760

BRICK

CONSTRUCTION PERMIT APPLICATION C-17-003486

NEW JERSEY UNIFORM CONSTRUCTION CODE

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

I. IDENTIFICATION

Proposed Work Site at: 1684 W Princeton Ave.

Name of Owner in Fee: Tiarone

Tel: [redacted] e-mail

Address Same — (street) (municipality) (zip code)

Ownership in Fee: Public ____ Private X

4. Principal Contractor: Team Electric Plumbing & Air Tel. (732) 786-9231

Address 77 Pension Road, Suite 19 e-mail

Manalapan, NJ 07726

License No. OR, if new home, Builder Reg. No. 12157 Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH03910600

Federal Emp. ID No. 22-3397119 FAX: (732) 786-9235

5. Architect or Engineer ____ Contact ____

Address ____ e-mail ____

Tel. (____) ____ FAX: (____) ____

6. Responsible Person in Charge once Work has Begun Team Electric Plumbing & Air

Tel. (732) 786-9231 FAX: (732) 786-9235

V. FEE SUMMARY (for office use only)

		Update
1. Building	$ 150	✓
2. Electrical		125 ✓
3. Plumbing		
4. ~~Fire Protection~~		N
5. Elevator Devices		
6. Subtotal		
7. Less 20% for State Plan Review	$	
8. Subtotal	$	
9. State Permit Surcharge Fee		1
10. Subtotal	$	
11. Cert. of Occupancy		
12. Other		
13. TOTAL	$	276

VI. BUILDING/SITE CHARACTERISTICS (office use only)

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

RECEIVED JUL 31 2017 BUILDING

IIa. PROPOSED WORK

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

IIb. SUBCODES (Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
[ ] Building									
[X] Electrical	$500								
[X] Plumbing	$200								
[ ] Fire Protection									
[ ] Elevator									
TOTAL COST	$100								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*

1. State Specific Use:
2. Use Group, Proposed: ____
3. Change in Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   - Gained, Sale ____ ____
   - Gained, Rental ____ ____
   - Lost, Sale ____ ____
   - Lost, Rental ____ ____

B. NON-RESIDENTIAL *(primary use)*

1. State Specific Use:
2. Use Group, Proposed: ____
3. Change in Use Group, Indicate Present:

C. MIXED USE -List secondary use(s):

D. Construct. Classification: Present / Proposed

III. PLAN REVIEW (optional)

DO YOU WANT:
1. Partial Releases
2. Prototype Processing

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

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 9/8/2017
Control Number C-17-003486
Permit Number 17-2760
Permit Issue Date 8/15/2017
Certificate Number 17-2760

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1684 W. PRINCETON AVE. Brick Township, NJ Block: 835 Lot: 1 Qual:

Owner in Fee: FACCONE, PHILIP & EUGENIA

Owner Address: 1684 W. PRINCETON AVE BRICK NJ 08724

Telephone: [redacted]

Contractor TEAM ELECTRIC, PLUMBING & AIR

Address 77 PENSION RD SUITE #19 MANALAPAN NJ 07726-

Telephone: (732) 786-9231 Fax: (732) 849-0699

License Number or Builders Registration Number: 36BI00973400
34EI01215700
13VH03910600

Federal Emp. Number: 22-3397119

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: REPLACEMENT WATER HEATER, SERVICE

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:

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

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

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

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

Signature _____ Date _____

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

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

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

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

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

(X) Check if contractor.

Agent Name **Team Electric Plumbing & Air**

Address **77 Pension Road, Suite 19**

Manalapan, NJ 07726

Telephone **732 - 786-9231**

Signature _____

III. ( ) LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(b)4.

IV. ( ) HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

CONSTRUCTION PERMIT

Date Issued 8/15/17
Control # C-17-008486
Permit # 17-2760

IDENTIFICATION Block: 835 Lot: 1 Qualifier
Work Site Location: 1684 W. PRINCETON AVE. Brick Township, NJ
Owner in Fee FACCONE, PHILIP & EUGENIA
1684 W. PRINCETON AVE BRICK NJ 08724
Telephone: [redacted]

Contractor TEAM ELECTRIC, PLUMBING & AIR
Address 77 PENSION RD SUITE #19 MANALAPAN NJ 07726-
Telephone: (732) 786-9231
Lic. No. or Bldrs. Reg. No. 13VH03910600 34EI01215700
Federal Employee. No. 22-3397119 [illegible] 13VH03910600

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
REPLACEMENT WATER HEATER, SERVICE

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 $700

Construction Official Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$150
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$125.00
DCA Training Fee	$1
CO Fee	
Other	$0
Total	$276
Check No.	
Cash	5347 $0
Credit	$0

Collected By [illegible]

U.C.C. F170
equiv (rev 1/04)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

#2760
ELECTRIC $150.00
MECH. $125.00
DCA $1.00
CHECK $276.00

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.

MECHANICAL INSPECTION
TECHNICAL SECTION

Date Received 8/15/17
Control #
Date Issued
Permit # 17-2760

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

Block 835 Lot 1 Qualification Code

Work Site Location 1684 West Princeton Avenue

Owner in Fee: Faccone

Tel. [redacted] e-mail Plumbing Lic# 9734

Address Same
street municipality zip code

Contractor: Team Electric Plumbing and Air Tel. (732) 786-9231

Address 77 Pension Road Suite 19 e-mail

Manalapan, NJ 07726

Contractor License No. 34EO1215700 Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. 22-339711 FAX: (732) 786-9235

B. MECHANICAL CHARACTERISTICS

Use Group Present: R-5

Heating System work: [ ] New OR [ ] Modification to Existing OR [ ] Conversion OR [X] Replacement

Type: [ ] Hydronic [ ] Hot Air

Fuel Type: [X] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other

Estimated Cost of Mechanical Work $ 200

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the agent for owner of record and am authorized to make this application.

Sign here:

Print name here: Adam Belitz

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Inspect water heater installed by others

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Mechanical Plans Approved
Date: Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire.
[ ] Elev.
SUBCODE APPROVAL for PERMIT
Date:
Approved by:
SUBCODE APPPROVAL for CERTIFICATE
[ ] CA [ ] CCO
Date: 8-22-17
Approved by:

INSPECTIONS Type:	DATES Failure	Failure	Approval	Initial
Gas Piping				
Appliance				
Chimney/Vent				
Oil Piping				
Oil Tank				
LPG Tank				
Hydronic Piping				
Fireplace				
Chimney Cert.				
Other Final			8-22-17	

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
1	Water Heater	$
	Fuel Oil Piping Connections	
	Gas Piping Connections	
	Steam Boiler	
	Hot Water Boiler	
	Hot Air Furnace	
	Oil Tank	
	LPG Tank	
	Fireplace	
	Generator	
	Other	
	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.

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 8/15/17
Control #
Date Issued
Permit # 17-2760

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

Block 835 Lot 1 Qualification Code

Work Site Location 1684 W Princeton Ave.

Gibbsboro

Owner

Tel. [redacted] e-mail

Address Same -
street municipality zip code

Contractor: Team Electric Plumbing & Air Tel. (732) 786-9231

Address 77 Pension Road, Suite 19 e-mail
Manalapan, NJ 07726

Contractor License No. 34EO1215700 Exp. Date

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

Federal Emp. ID No. 22-3397119 FAX: (732) 786-9235

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

[ ] Pole/Pad # [ ] Temporary [ ] Other

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ $500

AUG 03 2017

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved
Date: Approved by:

[ ] Electric Plans Approved
Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 8-25-17
Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other Service	Waived	8-24-17	8-25-17	
Final				
Barrier-Free				

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

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here: M.O'Brien

Print name here: Michael Polchak

[X] Licensed Elec. Contractor [ ] Certified Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Meter panel installed by others

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
1	100	AMP Service	
		AMP ~~Subpanels~~ panel	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

License Information

Accurate as of August 07, 2017 11:01 AM

Return to Search Results

Name: ADAM B BELITZ

Address: Monroe,NJ

Profession/License Type: Master Plumbers,Master Plumber

License No: 36BI00973400

License Status: Active

Status Change Reason: License Renewal

Issue Date: 11/10/1992

Expiration Date: 6/30/2019

Board Action: YES*

Please visit DCA's website to see the final disposition documents.

* A "YES" in the "Board Action" field indicates that the licensee has a public record of some form of action on file with the Board/Committee. Board actions may come in the form of a Consent Order, Cease and Desist Order, Interim Order, Reprimand, a finalized Uniform Penalty Letter, agreed upon Settlement Letter or Final Order. In some instances, "Yes" will represent that a public record of a pending matter such as an Administrative Complaint or a Provisional Order of Discipline may have been filed with the Board/Committee. Such documents represent the filing of allegations by the Attorney General, and do not represent a finding of misconduct until the matter is adjudicated by the Board. Contact the Board/Committee directly to obtain a copy of such documents.

State Board of Examiners of Master Plumbers at (973) 504-6420

CHIMNEY VERIFICATION FOR REPLACEMENT OF FUEL-FIRED EQUIPMENT

BLOCK 805 LOT 1 QUALIFICATION CODE _____ PERMIT # _____

WORK SITE ADDRESS 1167 West Princeton Ave.

Owner in Fee Falcone

Verifying Individual Chris Cavan Company Team

Address 11 Pension Rd #19 Manalapan 07726
City State Zip Code

T [redacted] Fax: 732 786 9235

Check the Appropriate Box(es):

Type of Replacement:

- ☐ Oil to Gas Conversion
- ☐ Gas to Oil Conversion
- ☐ Gas Appliance Replacement
- ☐ Oil to Oil Replacement
- ☐ Other _____

Existing Vent/Chimney: Size 5"

- ☐ "B" Label Vent
- ☐ "L" Label Vent
- ☒ Flexible Liner
- ☒ Power Vent/Exhauster
- ☐ Chimney-Interior
- ☐ Chimney-Exterior
- ☐ Masonry Chimney-Tile Lined
- ☐ Masonry Chimney-Unlined
- ☐ Other _____

	Type	Fuel Type	BTU Rating (input/hour)
Appliance 1:	WH	Oil / Gas / Other:	40K
Appliance 2:	Furnace	Oil / Gas / Other:	75K
Appliance 3:		Oil / Gas / Other:	

CHIMNEY LINER

If a chimney liner is being installed, all documentation on the liner must accompany the Permit application.

Manufacturer: _____ Model: _____ UL Listing: _____

Material of Liner: Stainless Steel _____ Aluminum _____

Size of Appliance Vent: _____ Size of Liner: _____ Height of Chimney: _____

Length of Connector: _____ Vent Connector Rise: _____

How does the appliance vent? ☐ Natural Draft ☐ Fan-assisted ☐ Other: _____

PLEASE SIGN ONE OF THE FOLLOWING VERIFICATION STATEMENTS

For Oil or Coal to Gas Conversions:

I have verified that the chimney/vent is in good repair and clear of obstruction and is substantially clean of residue from its previous use serving an oil or coal appliance. I have verified that the chimney/vent is appropriately lined and sized for the appliance(s) being installed.

_____
Signature Date

Oil to Oil or Gas to Gas Replacements or New/Additional Appliances:

I have verified that the existing chimney/vent is in good repair and clear of obstruction. I have verified that the existing chimney/vent is appropriately lined and sized for the appliance(s) being installed and/or remaining.

Inspection

_____ 7/25/17
Signature Date

Direct Vent Appliance:

I hereby verify that the appliance(s) being installed is a direct vent appliance. I further verify that the existing chimney/vent is appropriately lined and sized for any remaining appliances.

_____
Signature Date

Verification Not Submitted:

I choose not to submit verification. I understand that I will be required to be present for the inspection to remove and reinstall the chimney vent connector.

_____
Signature Date

FOR MINOR AND EMRGENCY WORK, THIS FORM MUST BE PROVIDED WITH YOUR PERMIT APPLICATION. FOR ALL OTHER WORK, THIS FORM MUST BE PRESENTED TO THE CODE OFFICIAL PRIOR TO FINAL INSPECTION.

All applicable information requested on this form must be supplied.
This form may not be submitted by a homeowner in lieu of the required inspection.

PERFORMANCE PLATINUM

The new degree of comfort.™

The energy efficient PERFORMANCE PLATINUM™ Powered Damper gas water heaters meet or exceed the latest ENERGY STAR® requirements

Efficiency
- .65 - .69 UEF
- ENERGY STAR® rated

Performance
- FHR: 71 - 87 gallons
- Recovery rate is up to 40.4 gallons at a 90° F rise, depending on model

Electronic Diagnostic Valve
- Electronic gas control for improved monitoring and service

Low Emissions
- Eco-friendly burner, low NOx design
- Meets 40 ng/J NOx requirements

EcoNet™

- EcoNet™ enabled for integration with home automation, energy management and demand response systems

Technology
- 24 VAC flue damper, 120 VAC outlet required
- Includes 19-foot cord, 3-prong plug
- Standard Cat. I, double-wall, B-vent, 3"/4" combo vent

What is a Powered Damper?

The 24-volt powered flue damper is positioned atop the unit. It opens and closes automatically in response to gas-burner activity. When the combustion stops, it signals the damper to close, trapping the heat inside the flue and delivering more heat to the water.

Maintenance Free Burner System
- Exclusive air/fuel shut-off device
- Maintenance free – no filter to clean
- Disables the heater in the presence of flammable vapor accumulation

Combustion Shut-off System

Flame Arrestor Plate

Self-Cleaning
- Fights sediment and mineral build-up
- Reduces fuel costs

Longer Life
- Premium grade anode rod provides long-lasting tank protection

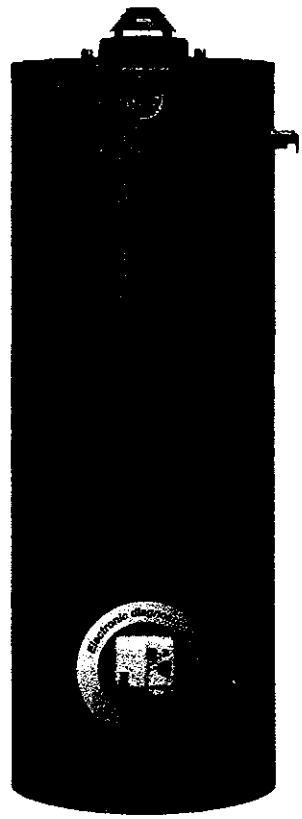
High Altitude Compliant
- Certified to 10,200 ft. above sea level

Plus...
- Dual certified for both potable water and space heating
- Durable brass drain valve
- Temperature and pressure relief valve included
- Low lead compliant

Warranty
- 12-Year limited warranty for tank and parts, 3-year full in-home labor warranty*

*See written warranty for complete details

Units meet or exceed ANSI requirements and have been tested according to D.O.E. procedures. Units meet or exceed the energy efficiency requirements of NAECA, ASHRAE standard 90, ICC Code and all state energy efficiency performance criteria.



PERFORMANCE **PLATINUM**
Powered Damper
38, 40 and 50-Gallon Capacities
Up to 40,000 Btu/h

ENERGY STAR

LEED Point = 1

See dimensions chart on back.

Rheem

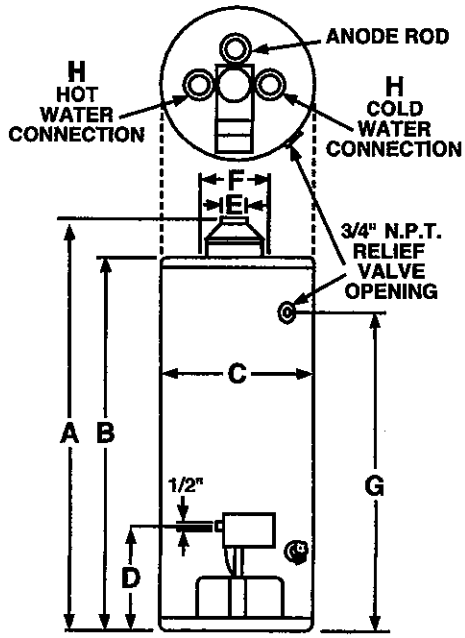
The new degree of comfort.™

PERFORMANCE **PLATINUM**™ Powered Damper Specifications

Fuel Type	Description	Nominal Gallon Capacity	Rated Gallon Capacity	Model Number	Gas Input in Thous. Btu/h	Recovery in G.P.H. 90° F Rise	First Hour Delivery G.P.H.	Ht. to Vent A	Tank Height B	Diam. C	Ht. to Gas Conn. D	Vent Size E	Water Conn. Center F	Ht. to Side T&P Valve G	Water Conn. Size H	Ship Weight (LBS)	Energy Factor	Uniform Energy Factor (UEF)
Performance Platinum - ENERGY STAR Powered Damper Gas Products with EcoNet WiFi Module Included																		
Natural Gas	Tall	50	48	XG50T12DM40U0W	40	40.4	81	63-1/2	58-1/2	21-3/4	14	3 or 4	8	52-1/2	3/4	160	0.67	0.69
Natural Gas	Tall	38	37	XG40T12DM40U0W	40	40.4	72	63	58	19-3/4	14	3 or 4	8	52-1/4	3/4	140	0.69	0.66
Natural Gas	Short	40	38	XG40S12DM40U0W	40	40.4	71	55-1/2	50-1/2	21-3/4	14	3 or 4	8	44	3/4	140	0.67	0.65
Performance Platinum - ENERGY STAR Powered Damper Gas Products																		
Natural Gas	Tall	50	48	XG50T12DM40U0	40	40.4	87	63-1/2	58-1/2	21-3/4	14	3 or 4	8	52-1/2	3/4	160	0.67	0.69
Natural Gas	Short	50	48	XG50S12DM40U0	40	40.4	86	55-1/2	50-1/2	23-3/4	14	3 or 4	8	44	3/4	160	0.67	0.69
Natural Gas	Tall	38	37	XG40T12DM40U0	40	40.4	72	63	58	19-3/4	14	3 or 4	8	52-1/4	3/4	140	0.69	0.66
Natural Gas	Short	40	38	XG40S12DM40U0	40	40.4	71	55-1/2	50-1/2	21-3/4	14	3 or 4	8	44	3/4	140	0.67	0.65
Liquid Propane	Tall	50	48	XP50T12DM36U0	36	36.4	87	63-1/2	58-1/2	21-3/4	14	3 or 4	8	52-1/2	3/4	160	0.67	0.69
Liquid Propane	Short	50	48	XP50S12DM36U0	36	36.4	86	55-1/2	50-1/2	23-3/4	14	3 or 4	8	44	3/4	160	0.67	0.69
Liquid Propane	Tall	38	37	XP40T12DM36U0	36	36.4	72	63	58	19-3/4	14	3 or 4	8	52-1/4	3/4	140	0.69	0.66
Liquid Propane	Short	40	38	XP40S12DM36U0	36	36.4	71	55-1/2	50-1/2	21-3/4	14	3 or 4	8	44	3/4	140	0.67	0.65

Uniform Energy Factor, Energy Factor and rated gallon capacity based on Department of Energy (DOE) requirements.

LEED Point = 1



In keeping with its policy of continuous progress and product improvement, Rheem reserves the right to make changes without notice.

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