



Township Archives
Township of Brick, NJ
401 Chambers Bridge Rd, Brick, NJ 08723

***This File Contains Personal Identifiable
Information of Private Citizen(s).***

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- Social Security Numbers
- Drivers' License Numbers
- Unlisted Phone Numbers
- Credit Card Numbers
- Bank Account Numbers and Balances

For further information, consult with the Township Clerk, Township Archivist or Township Attorney prior to release.

A handwritten signature in black ink, appearing to read "Bryan J. Dickerson", is written over a horizontal line.

Bryan J. Dickerson, CA, CMR
Township Archivist

Issued: 8 January 2020

BLOCK 380.04 LOT 27 QUALIFICATION CODE _____ ADDRESS (SITE) 77 Lions Head Blvd PERMIT NO. 20-0654



CONSTRUCTION PERMIT APPLICATION

C-20-000705

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

I. IDENTIFICATION

1. Proposed Work Site at: 77 Lions Head Blvd Brick

2. Name of Owner in Fee: Margaret DeFillipo

Tel. _____ e-mail _____

Address 77 Lions Head Blvd Brick 08723

3. Ownership in Fee: Public _____ Private _____

4. Principal Contractor: BRICK TOWNSHIP Tel. (732) 477-3300

Address HEATING & AIR CONDITIONING e-mail info@bricktownship

465 Brick Blvd. hvac.com

Brick, NJ 08723

License No. OR, if new home, Builder Reg. No. 19HC 00520700 Exp. Date 6/30/26

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH01918000

Federal Emp. ID No. 210703175 FAX: (732) 477-0205

5. Architect or Engineer _____ Contact _____

Address _____ e-mail _____

Tel. () _____ FAX: () _____

6. Responsible Person in Charge once Work has Begun CRAIG LAW

Tel. (732) 477-3300 FAX: (732) 477-0205

V. FEE SUMMARY (for office use only)

	Update	Update
1. Building	\$ <u>150</u> ✓	
2. Electrical		
3. Plumbing		
4. Fire Protection		
5. Elevator Devices		
6. Subtotal <u>Meen</u>	\$ <u>350</u> ✓	
7. Less 20% for State Plan Review	\$	
8. Subtotal	\$ <u>12</u> -	
9. State Permit Surcharge Fee	\$	
10. Subtotal	\$	
11. Cert. of Occupancy		
12. Other		
13. TOTAL	\$ <u>512</u> -	

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 _____	

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
- ☒ mech 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 Approval	Rejection	Re-viewer
<u>3200</u>	<u>CW</u>	<u>2/27/20</u>		<u>3-5-2020</u>	<u>MM</u>			
<u>3200</u>				<u>3-11-20</u>	<u>SN</u>			
<u>3200</u>								

TOTAL COST 9600

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):

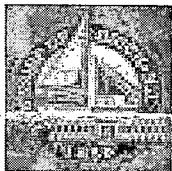
- D. Construct. Classification: Present _____
- Proposed _____

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 03/30/2021
Control Number C-20-000705
Permit Number 20-0654
Permit Issue Date 03/24/2020
Certificate Number 20-0654

Certificate
Construction Code Division
(Certificate of Approval)

Identification

Work Site Location: 77 LIONSHEAD BLVD. SO. Brick Township, NJ Block: 380.04 Lot: 27 Qual: _____
Owner in Fee: MARGARET DEFILLIPO
Owner Address: 77 LIONSHEAD BLVD BRICK NJ 08723
Telephone: [REDACTED]
Contractor BRICK TOWNSHIP HEATING & AIR
Address 465 BRICK BLVD BRICK NJ 08723
Telephone: (732) 477-3300 Fax: (732) 477-0205 Federal Emp. Number: 21-0103175
License Number or Builders Registration 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: ELECTRIC TO GAS CONVERSION

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

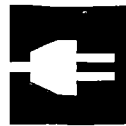
Date Printed: 03/30/2021

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

Fee: \$0.00
Check Number: _____
Collected By: _____



ELECTRICAL 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 380.04 Lot 27 Qualification Code _____

Work Site Location 77 Lions Head Blvd
Brick NJ 08723

Owner in Fee: Margaret DeFillipo

Tel. _____ e-mail _____

Address 77 Lions Head Blvd Brick 08723
street municipality zip code

Contractor: Eureka Electric SVC Tel. (732) 255-2822

Address PO BOX 4075 e-mail _____
Brick NJ 08723

Contractor License No. 4872 Exp. Date 2021

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

Federal Emp. ID No. 221814013 FAX: (732) 255-7932

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work \$ 3200

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW		Type:	Failure	Failure	Approval Initial
[X] No Plans Required <u>3-5-2020</u>		Rough			
[] Partial - Underslab Utilities Approved		Barrier-Free			
Date: _____ Approved by: _____		Trench			
[] Electric Plans Approved		Temp. Serv.			
Date: _____ Approved by: _____		Constr. Serv.			
Joint Plan Review Required:		TCO			
[] Bldg. [] Plumb. [] Fire. [] Elev.		Other			
SUBCODE APPROVAL for PERMIT		Service			
Date: <u>3-5-2020</u>		Final			
Approved by: <u>MM</u>		Barrier-Free			
SUBCODE APPROVAL for CERTIFICATE		Temp. Cut-in-Card Date Issued			
[] CO [] CCO [] CA		Final Cut-in-Card Date Issued			
Date: <u>3-4-2020</u>		Annual Pool Inspection			
Approved by: <u>MM</u>		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: [Signature]

Print name here: Robert R. SeGill, Inc.

☒ Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr [] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: CONV elect. gas furnace, A/C, HWH

QTY.	SIZE	ITEMS	FEE (Office Use Only)
1		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	
1	2 1/2 Tons	KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
1	70,000	KW Elec. Sign/Outline Light	
1	175,000	HWH - Tankless	

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



BUILDING 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 380.04 Lot 27 Qualification Code _____
Work Site Location 77 Lions Head Blvd
Brick NJ 08723
Building Owner Margaret DeFillipo
Address 77 Lions Head Blvd
Brick NJ 08723
Tel. _____
Contractor Brick Township Heating & A/C
Address 465 Brick Blvd
Brick, NJ 08723
Tel. (732) 477-3300 FAX (732) 477-0205
Contractor License No. or Builder Registration No. 19HC00520700
Federal Emp. No. 21-0703175

JOB SUMMARY (Office Use Only)			INSPECTIONS		Dates (Month/Day)			
PLAN REVIEW	Date	Initial	Type:	Failure	Failure	Approval	Initial	
☐ No Plans Required	_____	_____	Footings	_____	_____	_____	_____	
☐ All	_____	_____	Footings Bonding	_____	_____	_____	_____	
☐ Footings	_____	_____	Foundation	_____	_____	_____	_____	
☐ Foundation	_____	_____	Slab	_____	_____	_____	_____	
☐ Frame	_____	_____	Frame	_____	_____	_____	_____	
☐ Other	_____	_____	Truss Sys./Bracing	_____	_____	_____	_____	
Joint Plan Review Required:			Barrier-Free	_____	_____	_____	_____	
☐ Elec. ☐ Plumb. ☐ Fire ☐ Elevator			Insulation	_____	_____	_____	_____	
SUBCODE APPROVAL			Finishes-Base Layer	_____	_____	_____	_____	
☐ CO ☐ CCO ☐ CA			Finishes-Final	_____	_____	_____	_____	
Date: _____			Energy	_____	_____	_____	_____	
Approved by: _____			Mechanical	_____	_____	_____	_____	
			TCO	_____	_____	_____	_____	
			Other	_____	_____	_____	_____	
			Final	_____	_____	_____	_____	
			Barrier-Free	_____	_____	_____	_____	

B. BUILDING CHARACTERISTICS

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

Est. Cost of Bldg. Work:

1. New Bldg. \$ _____
2. Rehabilitation \$ 3200
3. Total (1+2) \$ 3200

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.

Craig Law
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Conversion elect to gas
Furnace, A/C, HWH
New ductwork

TYPE OF WORK

- ☐ New Building
☐ Addition
☐ Rehabilitation
☐ Roofing
☐ Siding
☐ Fence _____ Height (exceeds 6')
☐ Sign _____ Sq. Ft.
☐ Pool
☐ Asbestos Abatement Subchapter 8
☐ Lead Haz. Abatement NJAC 5:17
☒ Other Furnace, A/C, HWH
☐ Demolition

FEE (Office Use Only)

\$ _____

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



MECHANICAL INSPECTOR TECHNICAL SECTION



Date Received
Control #

Date Issued
Permit #

3/24/20
20-0654

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

Block 380.04 Lot 27 Qualification Code _____

Work Site Location 77 Lions Head Blvd
Brick NJ 08723

Owner in Fee: Marcel DeFillipo

Tel. _____ e-mail _____

Address 77 Lions Head Blvd Brick 08723
street municipality zip code

Contractor: Ocean Gate Mech LLC Tel. (732) 606-9824

Address 133 E. Lakewood Ave PDB1177 e-mail _____
Ocean Gate NJ 08740

Contractor License No. or Builder Registration No. 7036 Exp. Date 6/30/21

Home Improvement Contractor Registration No. or Exemption Reason (if applicable): 13VH04271700

Federal Emp. ID No. 26-07038304 FAX: (____) _____

B. MECHANICAL CHARACTERISTICS

Use Group: Present: R-3, R-4 or (R-5 circle one) Proposed: R-3, R-4 or (R-5 circle one)

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

Type: [] Hydronic [] Hot Air

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

Estimated Cost of Mechanical Work \$ 3200

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

[X] Mechanical Plans Approved

Date: 3-11-20 Approved by: [Signature]

Joint Plan Review Required:

[] Bldg. [] Elec. [] Plumb. [] Fire.

[] Elev.

SUBCODE APPROVAL for PERMIT

Date: 3-11-20

Approved by: [Signature]

SUBCODE APPROVAL for CERTIFICATE

Date: 3-12-20

Approved by: [Signature]

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Gas Piping	_____	_____	<u>4-7-20</u>	<u>DM</u>
Appliance	_____	_____	_____	_____
Chimney/Vent	_____	_____	_____	_____
Oil Piping	_____	_____	_____	_____
Oil Tank	_____	_____	_____	_____
LPG Tank	_____	_____	_____	_____
Hydronic Piping	_____	_____	_____	_____
Fireplace	_____	_____	_____	_____
Chimney Cert.	_____	_____	_____	_____
Other <u>Final</u>	<u>5-1-20</u>	_____	<u>3-14-21</u>	<u>[Signature]</u>

DATES

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.

Sign here: [Signature]

Print name here: James Parks

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Conversion electric to gas
Furnace, A/C, HWH

Duct work

NO.

FIXTURE/EQUIPMENT

FEE (Office Use Only)

1

Water Heater 175,000 Tankless

\$ _____

Fuel Oil Piping Connections

3

Gas Piping Connections

Steam Boiler

Hot Water Boiler

1

Hot Air Furnace 70,000

Oil Tank

LPG Tank

Fireplace

1

Other A/C 2 1/2 Tons

1

stone

Administrative Surcharge \$ _____

Minimum Fee \$ _____

State Permit Surcharge Fee \$ _____

TOTAL FEE \$ _____

MC FPS.

Done remotely
by JD



CONSTRUCTION PERMIT

Date Issued 3/24/20
Control # C-20-000705
Permit # 20-0654

IDENTIFICATION Block: 380.04 Lot: 27 Qualifier _____
Work Site Location: 77 LIONSHEAD BLVD. SO. Brick Township, NJ Contractor BRICK TOWNSHIP HEATING & AIR
Owner in Fee MARGARET DEFILLIPO Address 465 BRICK BLVD BRICK NJ 08723
77 LIONSHEAD BLVD BRICK NJ 08723 Telephone: (732) 477-3300
Telephone: _____ Lic. No. or Bldrs. Reg. No. 13VH01918000 19HC00520700
Federal Employee No. 21-0103175

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:

ELECTRIC TO GAS CONVERSION

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 \$6,400

[Signature]
Construction Official

3/19/20
Date

U.C.C. F170
equiv (rev 1/04)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$150
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$350.00
DCA Training Fee	\$12
CO Fee	
Other	\$0
Total	\$512
Check No.	<u>8470</u>
Cash	\$0
Credit	\$0
Collected By	<u>[Signature]</u>

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.



CHIMNEY VERIFICATION FOR REPLACEMENT OF FUEL-FIRED EQUIPMENT

BLOCK 380.04 LOT 27 QUALIFICATION CODE _____ PERMIT # _____

WORK SITE ADDRESS 77 Lions Head Blvd

Owner in Fee Margaret DeFillipo

Verifying Individual Craig Law Company Brick Township Heating & A/C

Address 465 Brick Blvd Brick NJ 08723

Street

City

State

Zip Code

Tel: (732) 477-3300 Fax: (732) 477-0205

Check the Appropriate Box(es):

Type of Replacement:

- ☐ Oil to Gas Conversion
☐ Gas to Oil Conversion
☐ Gas Appliance Replacement
☐ Oil to Oil Replacement
☒ Other elect-gas conv.

Existing Vent/Chimney: Size _____

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

Type	Fuel Type	BTU Rating (input/hour)
Appliance 1: <u>Furnace</u>	Oil <u>(Gas)</u> Other: _____	<u>70,000</u>
Appliance 2: <u>HWH</u>	Oil <u>(Gas)</u> Other: <u>TANKLESS</u>	<u>175,000</u>
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.

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.

Craig Law 2/25/20
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 EMERGENCY 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.



BRICK TOWNSHIP
HEATING & AIR CONDITIONING
732-477-3300

FAX: 732-477-0205

FILE COPY

PLUMBING
MAR 11 2020

APPROVED



Project Summary
Entire Home
Brick Township Heating and Air Conditioning

Job:
Date: February 27, 2020
By:

465 Brick Blvd, Brick, NJ 08723 Phone: Info@bricktownshipvac Fax: (732) 477-0205 License: 13VH01918000

Project Information

For: Margaret DeFillipo
77 Lions Head Blvd., Brick, NJ 08723
Phone: [REDACTED]

Notes:

Design Information

Weather: Long Branch, NJ, US

Winter Design Conditions

Outside db 13 °F
Inside db 71 °F
Design TD 58 °F

Summer Design Conditions

Outside db 90 °F
Inside db 75 °F
Design TD 15 °F
Daily range M
Relative humidity 50 %
Moisture difference 30 gr/lb

Heating Summary

Structure 41473 Btuh
Ducts 10426 Btuh
Central vent (0 cfm) 0 Btuh
Humidification 10904 Btuh
Piping 0 Btuh
Equipment load 62803 Btuh

Sensible Cooling Equipment Load Sizing

Structure 15441 Btuh
Ducts 9317 Btuh
Central vent (0 cfm) 0 Btuh
Blower 0 Btuh

Use manufacturer's data n
Rate/swing multiplier 0.95
Equipment sensible load 23521 Btuh

Infiltration

Method Simplified
Construction quality Average
Fireplaces 0

	Heating	Cooling
Area (ft²)	1472	1472
Volume (ft³)	11776	11776
Air changes/hour	0.45	0.23
Equiv. AVF (cfm)	88	0

Latent Cooling Equipment Load Sizing

Structure 3293 Btuh
Ducts 1668 Btuh
Central vent (0 cfm) 0 Btuh
Equipment latent load 4962 Btuh

Equipment total load 28482 Btuh
Req. total capacity at 0.80 SHR 2.5 ton

Heating Equipment Summary

Make RHEEM
Trade
Model R95TC0701317MSA
AHRI ref
Efficiency 95 AFUE
Heating input 70000 Btuh
Heating output 68000 Btuh
Temperature rise 62 °F
Actual air flow 1000 cfm
Air flow factor 0.019 cfm/Btuh
Static pressure 0 in H2O
Space thermostat

Cooling Equipment Summary

Make RHEEM
Trade
Cond RA1630AJ1NA
Coil RCF3617STAMCA
AHRI ref
Efficiency 11.6 EER, 16 SEER
Sensible cooling 22852 Btuh
Latent cooling 9794 Btuh
Total cooling 32645 Btuh
Actual air flow 1000 cfm
Air flow factor 0.040 cfm/Btuh
Static pressure 0 in H2O
Load sensible heat ratio 0.83

Bold/italic values have been manually overridden

Calculations approved by ACCA to meet all requirements of Manual J 8th Ed.



Right-Suite® Universal 2015 15.0.09 RSU18194

C:\Users\supervisor\Documents\savegreen.rup Calc = MJ8 Front Door faces: N

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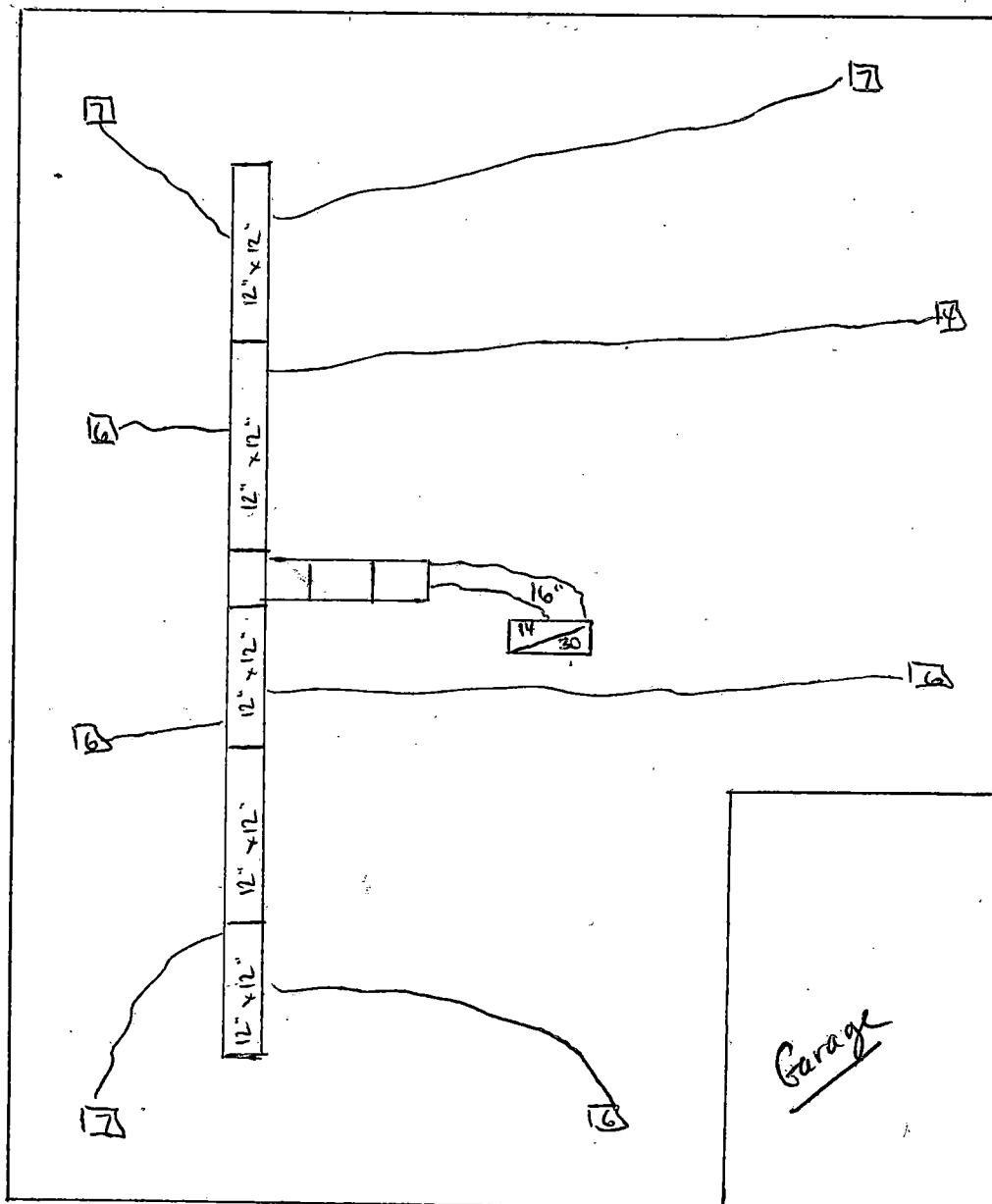
Page 1

465 BRICK BOULEVARD
BRICK TOWNSHIP, NJ 08723
NJHIC# 13VH01918000
HVACR# 19HC00520700

HEATING & AIR CONDITIONING

PHONE: 732-477-3300
FAX: 732-477-0205

DeFillipo, 77 Lions Head Blvd, Brick

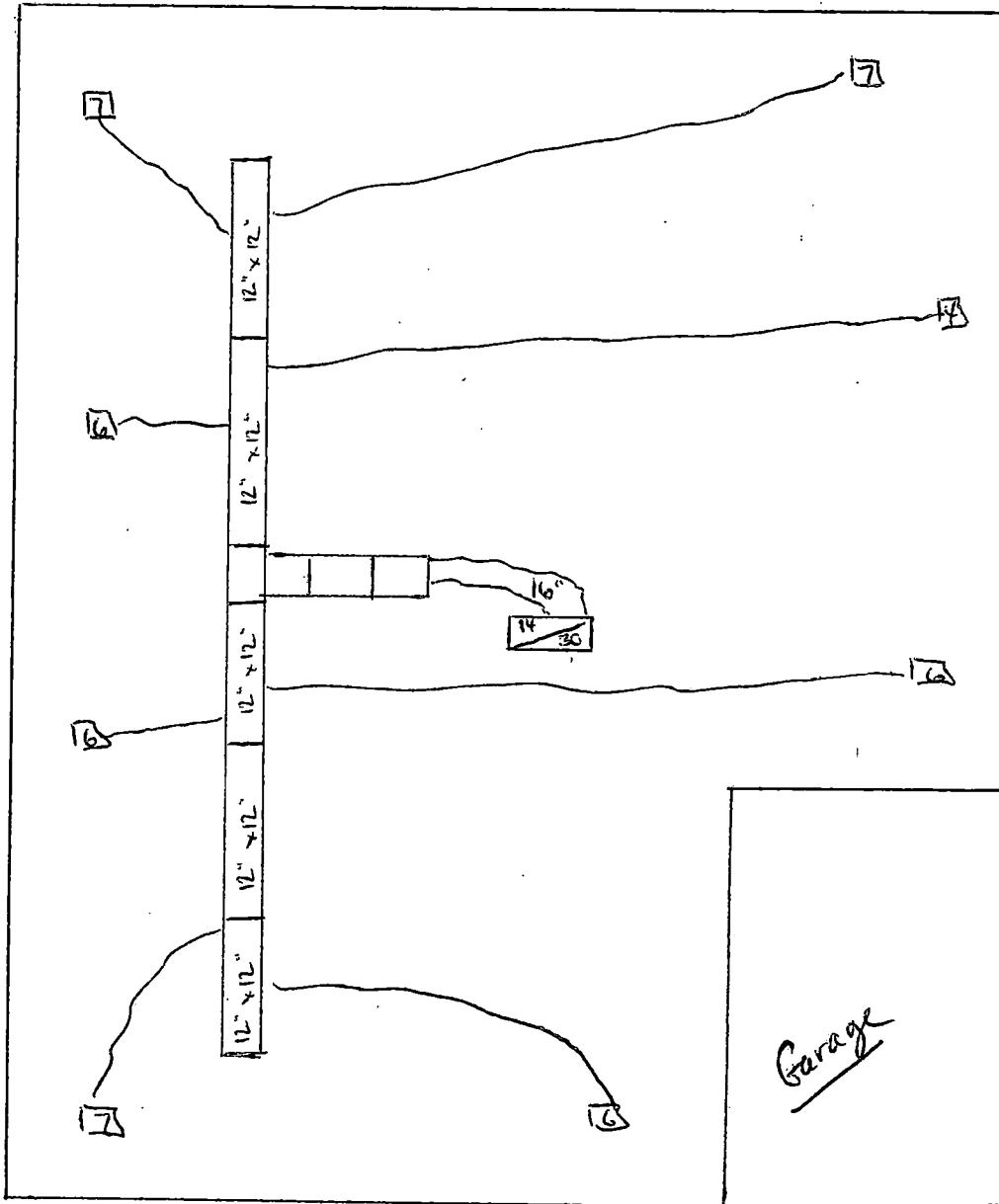


465 BRICK BOULEVARD
BRICK TOWNSHIP, NJ 08723
NJHIC# 13VH01918000
HVACR# 19HC00520700



PHONE: 732-477-3300
FAX: 732-477-0205

DeFillipo, 77 Lions Head Blvd, Brick





Premium Condensing Tankless Gas Water Heater

NPE Series Tankless Water Heaters Specification Sheet

• Certified design according to **ANSI Z21.10.3 - CSA 4.3-2015** standards for both indoor or outdoor installations (with optional Outdoor Vent Kit)

• Compatible with **1/2" gas pipe up to a length of 24 ft*** (*see Installation Manual for additional information)

• Compatible with **2" PVC vent up to 60 ft** and 150 ft** using 3" PVC vent** (**with no elbows)

• Gas Input Ranges

NPE-150 - 120,000 to 18,000 BTUh

NPE-180 - 150,000 to 15,000 BTUh

NPE-210 - 180,000 to 19,900 BTUh

NPE-240 - 199,900 to 19,900 BTUh

• Hot Water Flow Rate Capacity (*based on 35°F temperature rise)

NPE-150 - 6.8 GPM

NPE-180 - 8.4 GPM

NPE-210 - 10.1 GPM

NPE-240 - 11.2 GPM

• **Dual Primary and Secondary Stainless Steel Heat Exchangers** for optimum efficiency and durability

• **Built-in Control Panel** - allows adjustment of temperature settings and displays the operating status and error codes

• **ComfortFlow Technology** - "A" models come included with built-in 0.5 gallon **Buffer Tank** and **Recirculation Pump** to provide maximum comfort

• **INTELLIGENT Preheating** - recognizes hot water usage patterns to intelligently provide hot water when needed (optional for "S" models)

• **Temperature Options** - available temperature settings for Residential applications range from 98°F up to 140°F with high temperature Commercial mode capable of up to 182°F

• **Ready-Link Cascade Compatible** for up to 16 units for increased hot water production

• **Common Vent Compatible** - allows for cascade systems to use a single exhaust and/or intake pipe for up to 8 units with the use of the Common Vent Backflow Damper Collar Kit (#30014367A)

• Compatible with **Navilink Wi-Fi Control** (#PBCM-AS-001)

• **Freeze Protection** - maintains normal operation during freezing ambient temperatures down to -5°F (standard on all models)

• **Uniform Energy Factor Ratings** for NG and LP units

NPE-180A/210A/240A - 0.96 UEF (0.97 EF for Canada)

NPE-150S - 0.96 UEF (0.97 EF for Canada)

NPE-180S/210S/240S - 0.97 UEF (0.99 EF for Canada)

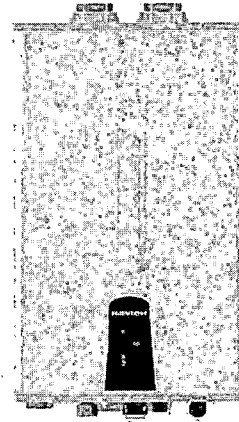
• Compatible with **Natural Gas (NG)** and **Propane (LPG)***** (***) requires installation of included Field Conversion Kit by a qualified gas servicer)

• Approved for Installations on **Mobile/Manufactured Homes**

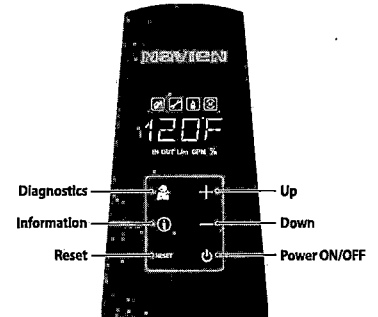
• Certified by **CSA, NSF 5, AHRI, AB1953 CA Low Lead, SCAQMD** (Rule 1146.2 Type 1 - Complies with 14 ng/l or 20 ppm NOx @ 3% O2)

• **15-Year Heat Exchanger and 5-Year Parts Warranty (Residential)******
8-Year Heat Exchanger and 5-Year Parts Warranty (Commercial)****
(**** see Navien Limited Warranty)

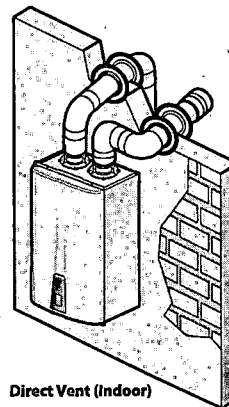
• **Optional accessories** are available (see below)



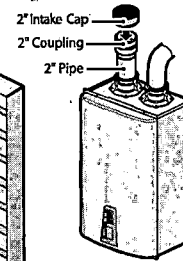
**Sleek Design - Compatible with
2" PVC Vent and 1/2" Gas Pipe**



**Built-In Control Panel
with Diagnostics**

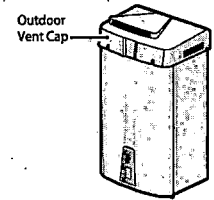


Direct Vent (Indoor)



Non-Direct Vent (Indoor)

Indoor and Outdoor Venting Options



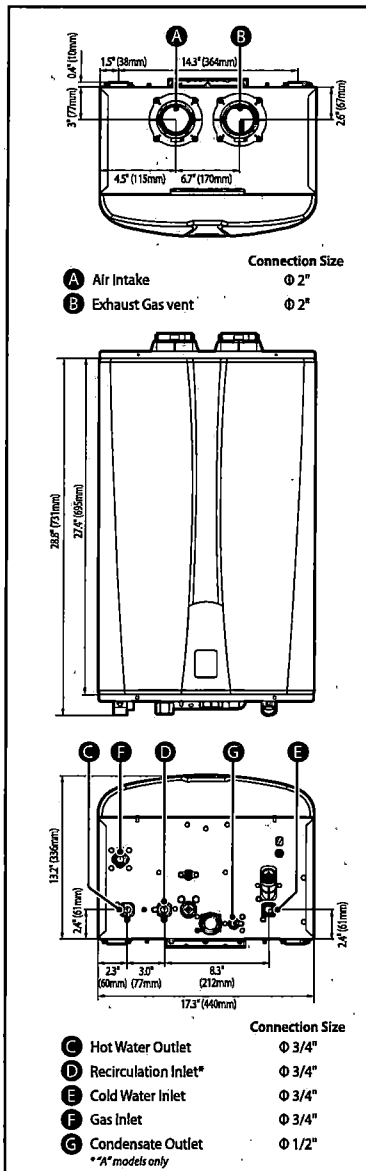
Non-Direct Vent (Outdoor)



Job Name: _____
Location: _____
Engineer: _____
Wholesaler: _____
Contractor: _____
Model No.: _____
Submitted to: _____

Remote Controller NR-20DU (30009757A)	Plumb Easy Valve Set (3/4") (30009323A - Lead Free) (30012581A - for Pipe Cover)	Condensate Neutralizer (GXXX001322 - Single Unit) (GXXX001324 - Up to 6 Units) (GXXX001325 - Up to 16 Units)	Ready-Link Communication Cable (GXXX000546)	Outdoor Vent Kit (30010604A)	External Pump Wire (GXXX001319)	3" Vent Termination Caps and Wall Flanges (GXXX3873B)

Dimensions



Specifications

Item		NPE-150S	NPE-180A	NPE-180S	NPE-210A	NPE-210S	NPE-240A	NPE-240S
Heat Capacity (Input)	Natural Gas	18,000-120,000 BTU/H	15,000-150,000 BTU/H		19,900-180,000 BTU/H		19,900-199,900 BTU/H	
	Propane Gas		15,000-150,000 BTU/H		19,900-180,000 BTU/H		19,900-199,900 BTU/H	
Efficiency Ratings	UEF (for NG & LP)	0.96	0.96	0.97	0.96	0.97	0.96	0.97
	EF (Canada) (for NG & LP)	0.97	0.97	0.99	0.97	0.99	0.97	0.99
Flow Rate (DHW)	35°F(19°C) Temp Rise	6.8 GPM (26 L/m)	8.4 GPM (32 L/m)		10.1 GPM (38 L/m)		11.2 GPM (42 L/m)	
	45°F(25°C) Temp Rise	5.3 GPM (20 L/m)	6.5 GPM (25 L/m)		7.8 GPM (30 L/m)		8.7 GPM (33 L/m)	
	67°F(36°C) Temp Rise	3.2 GPM (12 L/m)	4.3 GPM (16 L/m)	4.2 GPM (16 L/m)	5.0 GPM (19 L/m)	5.2 GPM (20 L/m)	5.6 GPM (21 L/m)	5.7 GPM (22 L/m)
Dimensions		17.3"(W) x 27.4"(H) x 13.2"(D)						
Weight		55 lbs (25kg)	75 lbs (34kg)	67 lbs (30kg)	82 lbs (37 kg)	75 lbs (34kg)	82 lbs (37 kg)	75 lbs (34kg)
Installation Type		Indoor or Outdoor Wall-Hung						
Venting Type		Forced Draft Direct Vent						
Ignition		Electronic Ignition						
Water Pressure		15-150 PSI						
Natural Gas Supply Pressure (from source)		3.5 in WC-10.5 in WC						
Propane Gas Supply Pressure (from source)		8 in WC-13in WC						
Natural Gas Manifold Pressure (min-max)		-0.04 in WC - -0.38 in WC	-0.04 in WC - -0.84 in WC		-0.05 in WC - -0.36 in WC		-0.05 in WC - -0.58 in WC	
Propane Gas Manifold Pressure (min-max)		-0.04 in WC - -0.42 in WC	-0.05 in WC - -0.50 in WC		-0.10 in WC - -0.66 in WC		-0.10 in WC - -0.78 in WC	
Minimum Flow Rate		0.5 GPM (1.9 L/m), < 0.01 GPM (0.04 L/m) option for "A" models*						
Connection Sizes	Cold Water Inlet	3/4 in NPT						
	Hot Water Outlet	3/4 in NPT						
	Gas Inlet	3/4 in NPT						
Power Supply	Main Supply	120V AC, 60Hz						
	Maximum Power Consumption	200W (max 2A), 350W (max 4A) with external pump connected						
Materials	Casing	Cold Rolled Carbon Steel						
	Heat Exchangers	Primary Heat Exchanger: Stainless Steel Secondary Heat Exchanger: Stainless Steel						
Venting	Exhaust	2" or 3" PVC, CPVC, Polypropylene 2" or 3" Special Gas Vent Type BH (Class II, A/B/C)						
	Intake	2" or 3" PVC, CPVC, Polypropylene 2" or 3" Special Gas Vent Type BH (Class II, A/B/C)						
	Vent Clearances	0" to combustibles						
Safety Devices	Flame Rod, APS, Ignition Operation Detector, Water Temperature High Limit Switch, Exhaust Temperature High Limit Sensor, Power Surge Fuse							

* Available for "A" models configured in an optional ComfortFlow recirculation mode. Additional energy use will occur when using recirculation.

Gas-fired, tankless, condensing, wall-mounted water heater(s) shall be direct vent NPE Series models as manufactured by Navien, Inc. and are certified by CSA Group to the latest edition of ANSI standard Z21.10.3/CSA 4.3. Water heater(s) shall have a 15-year limited Heat Exchanger warranty and 5-year limited Parts warranty (8-year Heat Exchanger and 5-year Parts for Commercial use) per Navien Limited Warranty. Unit(s) shall be designed to burn natural gas and can be for use with propane when a Field Conversion Kit is installed. Water heater(s) shall have a nominal flow rate capacity of _____ GPM/GPH at _____ °F rise with rated input of _____ BTU/hr. Water heater(s) shall be vented with 2" PVC/CPVC vent pipe at a distance not to exceed 60' (or equivalent) with each elbow equal to 8' of pipe length or 3" PVC/CPVC vent pipe at a distance of 150' (or equivalent) with each elbow equal to 5' of pipe length. Water heater(s) is rated for 150 PSI working water pressure and 300 PSI test pressure. Gas supply pressure shall be 3.5" to 10.5" WC for natural gas and 8.0" to 13.0" WC for propane. Unit(s) shall have a steel case, dual stainless steel heat exchangers, eco premixed burner, negative pressure gas valve, dual venturi, 3/4" inlet gas connection, 3/4" brass inlet/outlet water connections, water holding capacity of 0.6 gallons for the NPE-150S, 1.0 gallon for the NPE-180A model (0.7 gallons for NPE-180S model), 1.2 gallons for the NPE-210A/NPE-240A models (0.7 and 0.9 gallons for NPE-210S and NPE-240S models respectively), and a condensate collector. The NPE-150S model weighs 55 lbs, the NPE-180A model weighs 75 lbs (NPE-180S weighs 67 lbs), and the NPE-210A/NPE-240A models weigh 82 lbs (NPE-210S and NPE-240S weigh 75 lbs). Unit(s) shall include features such as an adjustment for installations at high elevation, temperature lockout, and temperature options from 98-120°F in 1°F intervals and 125-140°F in 5°F intervals. The unit(s) shall include additional temperature options of 150-180°F in 10°F intervals, and 182°F for high temperature commercial applications. All NPE "A" models shall include an internal circulation pump and 0.5 gallon buffer tank. The water heater(s) shall be controlled by an internal circuit board that monitors the inlet and outlet temperatures with installed thermistors, sensing and controlling flow rate to set point temperature with air-fuel ratio controls in order to maintain thermal combustion efficiency. Unit(s) shall include safety features such as flame sensor system, high limit sensors, overheat prevention device, freeze protection mode, and fan motor rotation detector. Multi-system (cascade) applications that require 2 to 16 units shall be installed by connecting the units using cable-only connections (Ready-Link). Cascade systems can be common vented with up to 8 units when a Common Vent Backflow Damper Collar Kit is installed. The water heater(s) exceeds the energy efficiency requirements of ASHRAE 90.1-2013 and is listed by SCAQMD rule 1146.2 (Type 1) for Low NOx that complies with 14 ng/J or 20 ppm NOx requirements @ 3% O2.

*Navien reserves the right to change specifications at any time without prior notice



Air

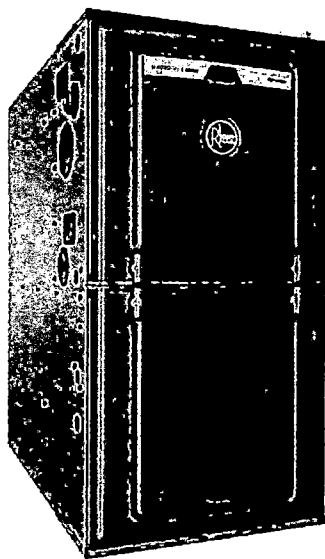
Gas Furnaces
R95T Series

The new degree of comfort.™

Rheem *Classic Plus*® Series Multi position Gas Furnaces

R95T- Series

95% A.F.U.E.†

Input Rates from 40 to 115 kBTU
[11.72 to 33.71 kW]†A.F.U.E. (Annual Fuel Utilization Efficiency) calculated in accordance with
Department of Energy test procedures.

- 95% residential gas furnace CSA certified
- 4 way multi-poise design
- PlusOne™ Diagnostics 7-Segment LED all units
- PlusOne™ Ignition System – DSI for reliability and longevity
- PlusOne™ Water Management System with patented Blocked Drain Sensor
- Heat exchanger is removable for improved serviceability. Aluminized steel primary and stainless steel secondary construction provide maximum corrosion resistance and thermal fatigue reliability.
- Low profile "34 inch" cabinet ideal for space constrained installations.
- Blower Shelf design – serviceable in all furnace orientations
- Pre marked hoses – insures proper system drainage
- Vent with 2" or 3" PVC
- Replaceable Collector box
- Hemmed edges on cabinet and doors
- Constant Torque electrically commutated motor
- Quarter turn fasteners for tool less access
- Integrated control boards feature dip switches for easy system set up
- Self priming condensate trap
- Solid bottom included



INTEGRATED HOME COMFORT

FORM NO. G11-539



Physical Data and Specifications—Upflow Models U.S. and Canadian Models

MODEL NUMBERS	R95TA0401317MSA	R95TA0601317MSA	R95TA0701317MSA	R95TA085121MSA	R95TA1001521MSA	R95TA1151524MSA
HIGH FIRE INPUT BTU/HR [kW] ①	42,000 [12.31]	56,000 [16.41]	70,000 [20.50]	84,000 [24.61]	98,000 [38.71]	112,000 [32.82]
HEATING CAPACITY BTU/HR [kW]	40,320 [11.82]	53,760 [15.75]	67,200 [19.68]	80,640 [23.63]	94,080 [37.16]	107,520 [31.51]
HIGH ALTITUDE OUTPUT 10% DERATE [kW] ②	36,288 [10.64]	48,384 [14.18]	60,480 [17.72]	72,576 [21.28]	84,672 [24.81]	96,768 [28.36]
BLOWER (D x W) [mm]	11 x 7 [279 x 178]	11 x 8 [279 x 203]	11 x 8 [279 x 203]	11 x 10 [279 x 254]	11 x 10 [279 x 254]	11 x 11 [279 x 279]
MOTOR H.P. [W]— TYPE	1/2 [373]-5-Constant Torque ECM	1/2 [373]-5-Constant Torque ECM	1/2 [373]-5-Constant Torque ECM	1 [746]-5-Constant Torque ECM	1 [746]-5-Constant Torque ECM	1 [746]-5-Constant Torque ECM
MOTOR FULL LOAD AMPS	4.0	6.8	6.8	8.3	8.3	8.3
HEATING SPEED	MED-HIGH	MED-HIGH	MED-HIGH	MED-HIGH	MED-HIGH	MED-HIGH
COOLING SPEED	HIGH	HIGH	HIGH	HIGH	HIGH	HIGH
MINIMUM EXT. STATIC PRESSURE (IN. W.C.) [kPa]	.18 [.045]	.20 [.050]	.23 [.057]	.28 [.070]	.28 [.070]	.28 [.070]
MAXIMUM EXT. STATIC PRESSURE (IN. W.C.) [kPa]	.9 [0.224]	.9 [0.224]	.9 [0.224]	.9 [0.224]	.9 [0.224]	.9 [0.224]
HEATING CFM @ .2" [.049 kPa] W.C. E.S.P. [L/s]	982 [463]	913 [431]	1113 [525]	1574 [743]	1651 [779]	1524 [719]
COOLING CFM @ .5" [.124 kPa] W.C. E.S.P. [L/s]	1239 [585]	1227 [579]	1198 [565]	1833 [865]	1975 [932]	1748 [825]
TEMPERATURE RISE-HIGH FIRE RANGE IN DEGREES °F [°C]	25 - 55 [14 - 31]	35 - 65 [19 - 36]	40 - 70 [22 - 39]	35 - 65 [19 - 36]	35 - 65 [19 - 36]	45 - 75 [25 - 42]
RETURN AIR CABINETS (OPT.) RXGR- FILTER SIZE [mm]	C17B (2) 12" x 16" [305 x 406]	C17B (2) 12" x 16" [305 x 406]	C17B (2) 12" x 16" [305 x 406]	C21B (2) 12" x 20" [305 x 508]	C21B (2) 12" x 20" [305 x 508]	C24B (2) 24" x 16" [609 x 406]
APPROX. SHIPPING WEIGHT (LBS.) [kg]	123.5 [56]	128 [58]	132 [60]	147.5 [67]	152 [69]	165 [75]
AFUE ③	95.00%	95.00%	95.00%	95.00%	95.00%	95.00%

NOTES: All models are 115V, 60HZ, 1 phase Gas connection size for all models is 1/2" [13 mm] N.P.T.

① Installation Instructions for high altitude derate.

② Canadian Installations only.

③ In accordance with D.O.E. test procedures.

*S=Standard Models

NOTE: Standard model complies with California low nox requirements.

[] Designates Metric Conversions

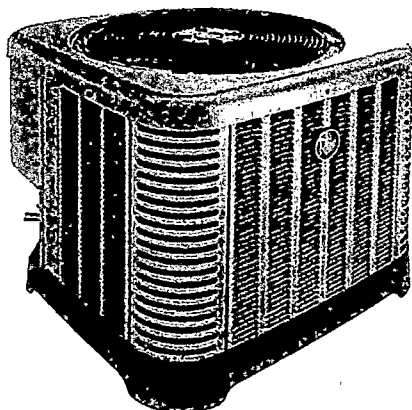




Air | Air Conditioners
RA16 Series

The new degree of comfort.™

Rheem Classic® Series Air Conditioners



RA16 Series

Efficiencies up to 16 SEER/13 EER

Nominal Sizes 1½ to 5 Ton [5.28 to 17.6 kW]

Cooling Capacities 17.3 to 60.5 kBTU
[5.7 to 17.7 kW]



"Proper sizing and installation of equipment is critical to achieve optimal performance. Split system air conditioners and heat pumps must be matched with appropriate coil components to meet Energy Star. Ask your Contractor for details or visit www.energystar.gov."

- New composite base pan – dampens sound, captures louver panels, eliminates corrosion and reduces number of fasteners needed
- Powder coat paint system – for a long lasting professional finish
- Scroll compressor – uses 70% fewer moving parts for higher efficiency and increased reliability
- Modern cabinet aesthetics – increased curb appeal with visually appealing design
- Curved louver panels – provide ultimate coil protection, enhance cabinet strength, and increased cabinet rigidity
- Optimized fan orifice – optimizes airflow and reduces unit sound
- Rust resistant screws – confirmed through 1500-hour salt spray testing
- PlusOne™ **Expanded Valve Space** – 3"-4"-5" service valve space – provides a minimum working area of 27-square inches for easier access
- PlusOne™ **Triple Service Access** – 15" wide, industry leading corner service access – makes repairs easier and faster. The two fastener removable corner allows optimal access to internal unit components. Individual louver panels come out once fastener is removed, for faster coil cleaning and easier cabinet reassembly
- Diagnostic service window with two-fastener opening – provides access to the high and low pressure.
- External gauge port access – allows easy connection of "low-loss" gauge ports
- Single-row condenser coil – makes unit lighter and allows thorough coil cleaning to maintain "out of the box" performance
- 35% fewer cabinet fasteners and fastener-free base – allow for faster access to internal components and hassle-free panel removal
- Service trays – hold fasteners or caps during service calls
- QR code – provides technical information on demand for faster service calls
- Fan motor harness with extra long wires allows unit top to be removed without disconnecting fan wire.



INTEGRATED HOME COMFORT



Air

General Data/Electrical Data
RA16 Series**Physical Data**

PHYSICAL DATA							
Model No.	RA1618A	RA1624A	RA1630A	RA1636B	RA1642A	RA1648A	RA1660A
Nominal Tonnage	1.5	2.0	2.5	3.0	3.5	4.0	5.0
Valve Connections							
Liquid Line O.D. – in.	3/8	3/8	3/8	3/8	3/8	3/8	3/8
Suction Line O.D. – in.	3/4	3/4	3/4	3/4	7/8	7/8	7/8
Refrigerant (R410A) furnished oz. ¹	82	87	113	108	150	174	201
Compressor Type	Scroll						
Outdoor Coil							
Net face area – Outer Coil	12.1	14.8	16.2	17.29	24.2	28.3	32.3
Net face area – Inner Coil	—	—	—	—	—	—	—
Tube diameter – in.	3/8	3/8	3/8	3/8	3/8	3/8	3/8
Number of rows	1	1	1	1	1	1	1
Fins per inch	22	22	22	22	22	22	22
Outdoor Fan							
Diameter – in.	20	24	26	24	26	26	26
Number of blades	3	2	3	3	3	3	3
Motor hp	1/8	1/6	1/5	1/6	1/3	1/3	1/3
CFM	2405	2850	3915	3300	4450	4660	4775
RPM	1095	851	710	825	829	828	795
watts	155	147	102	167	193	198	239
Shipping weight – lbs.	147	149	159	199	212	232	247
Operating weight – lbs.	140	142	152	192	205	225	240

Electrical Data

Line Voltage Data (Volts-Phase-Hz)	208/230-1-60	208/230-1-60	208/230-1-60	208/230-1-60	208/230-1-60	208/230-1-60	208/230-1-60
Maximum overcurrent protection (amps) ²	20	20	30	35	40	40	50
Minimum circuit ampacity ³	12	14	18	21	25	25	34
Compressor							
Rated load amps	9	10.3	12.8	15.4	16.7	17	23.7
Locked rotor amps	47.5	61.6	67.3	83.9	109	123.9	152.5
Condenser Fan Motor							
Full load amps	0.7	0.6	1.4	0.8	3.5	5.3	3.5
Locked rotor amps	1.3	1.5	2.3	1.5	—	2.3	—
Line Voltage Data (Volts-Phase-Hz)	—	—	—	208/230-3-60	208/230-3-60	208/230-3-60	208/230-3-60
Maximum overcurrent protection (amps) ²	—	—	—	20	25	30	35
Minimum circuit ampacity ³	—	—	—	14	18	21	24
Compressor							
Rated load amps	—	—	—	10.4	11.2	13.6	15.9
Locked rotor amps	—	—	—	73	88	83.1	110
Condenser Fan Motor							
Full load amps	—	—	—	0.8	3.5	3.5	3.5
Locked rotor amps	—	—	—	1.5	—	2.3	—

¹Refrigerant charge sufficient for 15 ft. length of refrigerant lines. For longer line set requirements see the installation instructions for information about set length and additional refrigerant charge required.

²HACR type circuit breaker or fuse.

³Refer to National Electrical Code manual to determine wire, fuse and disconnect size requirements.



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State Of New Jersey
New Jersey Office of the Attorney General
Division of Consumer Affairs

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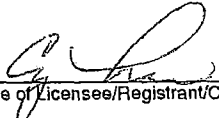
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Craig L. Law
465 Brick Blvd
Brick NJ 08723

FOR PRACTICE IN NEW JERSEY AS A(N): Master HVACR Contractor

06/14/2018 TO 06/30/2020
VALID

19HC00520700
LICENSE/REGISTRATION/CERTIFICATION #


Signature of Licensee/Registrant/Certificate Holder


ACTING DIRECTOR



The following person has successfully completed the Gastite Certification Training Program and is hereby recognized as a

Qualified Gastite Installer

James R. Parks

Name

Brick Twp. HVAC

Company

01T333598

Certificate No.

Marc Matzer

Instructor

02/16/2005

Date

42763

Authorized to purchase and install Gastite Flexible Gas Piping



The person named below has completed the *TracPipe* training program and is hereby awarded the

CERTIFICATE OF TRAINING.

John A. Lee
Installer's Name

T.A. Lee & Son
Company

Marc Matzer
Instructor

Certificate No.



TP