BLOCK 1170.04 LOT 4 QUALIFICATION CODE _____ ADDRESS (SITE) 132 John Street PERMIT NO. 10-1055

CONSTRUCTION PERMIT APPLICATION

RECD APR 26 2010

C10-001258

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

I. IDENTIFICATION

1. Proposed work Site at: 132 John Street
2. Name of Owner in Fee: Tunnington Te [redacted]
   Address Same (street) (municipality) (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: AJ Perri Tel. (732) 982-8700
   Address 1138 Pine Brook Road, Tinton Falls, NJ 07724
   License No. or, if new home, Builder Reg. No. 13VH00346300 Exp. Date _____
   Federal Employee No. 36-427609-7 Fax (732) 982-8715
5. Architect or Engineer: _____ Tel. ( ) _____
   Address _____ Contact: _____
6. Responsible Person in Charge once Work has Begun: Greg Johnston
   Tel. (732) 720-2116 Fax ( ) _____

Sewer Service
Public _____
Private _____

V. FEE SUMMARY (for office use only)

			Update	Update
1.	Building	$ 60 ✓		
2.	Electrical			
3.	Plumbing	50 ✓		
4.	Fire Protection	45 ✓		
5.	Elevator Devices			
6.	Subtotal	$		
7.	Less 20% for State Plan Review	34		
8.	Subtotal	$		
9.	State Permit Surcharge Fee			
10.	Subtotal	$		
11.	Cert. of Occupancy			
12.	Other			
13.	TOTAL	$ 159		

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.	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	

II. PROPOSED WORK

OPTIONAL (for office use only)

		Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1.	☐ Minor Work									
2.	☐ New Building									
3.	☐ Addition									
4.	☐ a. Repair									
	☐ b. Alteration									
	☐ c. Renovation									
	☐ d. Reconstruction									
5.	☒ Fire Protection	4260				4-30-10	DS			
6.	☒ Plumbing	6390				4-29-10	Wen			
7.	☒ Electrical	3550								
8.	☐ Elevator Devices									
9.	☐ Asbestos Abat. Subch. 8									
10.	☐ Lead Hazard Abatement									
11.	☐ Demolition									
	TOTAL COSTS	14,200								

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:	All Units	Income-restricted
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:

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

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. 5:23-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

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

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

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

(✓) Check if contractor.

Agent Name Greg Johnston A.J. Perri

Address 1138 Pine Brook Rd.
Tinton Falls, NJ 07724

Telephone ( ) 1-800-287-2164

36-427609-7

Signature Greg Johnston

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 06/15/2010
Control Number C-10-001258
Permit Number 10-1055
Permit Issue Date 05/10/2010
Certificate Number 10-1055

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 132 JOHN ST Brick Township, NJ Block: 1170.04 Lot: 4 Qual:

Owner in Fee: TUNNINGTON, THOMAS & BARBARA J

Owner Address: 132 JOHN ST BRICK NJ 08724

Telephone: [redacted]

Contractor A J PERRI INC

Address 1138 PINE BROOK ROAD TINTON FALLS NJ 07724

Telephone: (732) 982-8700 Fax: (732) 982-8715

License Number or Builders Registration Number: 13296B 13VH00346300 Federal Emp. Number: 36-4726097

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 A/C, REPLACEMENT HOT AIR FURNACE REPLACE A/C, GAS FURNACE AND CHIMNEY LINER.

Certificate Comments:

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

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

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

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

☐ **Certificate of Clearance - Lead Abatement 5:17**
This serves notice that based on written certification, lead abatement was performed as per NJAC5:17 to the following extent.

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

☐ **Certificate of Clearance - Asbestos Abatement**
This serves notice that based on written certification, asbestos abatement was performed to the following extent.

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

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

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

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 06/15/2010 U.C.C. F260 (rev. 08/05)

105559

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued

Permit #

IDENTIFICATION Block 1170.04 Lot 4 Qualification Code

Work Site Location 132 John Street Brick 08724

Owner in Fee Tunnington

Address Same

[redacted]

Contractor **A.J. Perri Inc.**

Address 1138 Pine Brook Road
Tinton Falls, NJ 07724

Tel. (732) 982-8700 Fax (732) 982-8715

Lic. No. or Bldrs. Reg. No. #03463

Is hereby granted permission to perform the following work:

[ ] BUILDING	[X] PLUMBING	[ ] LEAD HAZARD ABATEMENT	
[X] ELECTRICAL	[X] FIRE PROTECTION	[ ] DEMOLITION	
[ ] ELEVATOR DEVICES	[ ] ASBESTOS ABATEMENT (Subchapter 8 only)	[ ] OTHER	

DESCRIPTION OF WORK:
Replace A/C unit, gas furnace, and chimney liner.

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 $ 14,200.00

Construction Official

Date

PAYMENTS (Office Use Only)

Building
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA State Permit Fee
Cert. of Occupancy
Other
Total
Check No.
Cash
Collected by

U.C.C. F170 (rev. 01/04)

(see reverse side)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

AJ 036 Rev 11 06

105559

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued

Permit #

IDENTIFICATION Block 1170.04 Lot 4 Qualification Code

Work Site Location 132 John Street Brick 08724

Owner in Fee Tunnington

Address Same

Tel. [redacted]

Contractor **A.J. Perri Inc.**

Address 1138 Pine Brook Road
Tinton Falls, NJ 07724

Tel. (732) 982-8700 Fax (732) 982-8715

Lic. No. or Bldrs. Reg. No. #03463

Is hereby granted permission to perform the following work:

[ ] BUILDING	[X] PLUMBING	[ ] LEAD HAZARD ABATEMENT	
[X] ELECTRICAL	[X] FIRE PROTECTION	[ ] DEMOLITION	
[ ] ELEVATOR DEVICES	[ ] ASBESTOS ABATEMENT (Subchapter 8 only)	[ ] OTHER	

DESCRIPTION OF WORK:
Replace A/C unit, gas furnace, and chimney liner.

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 $ 14,200.-

Construction Official

Date

PAYMENTS (Office Use Only)

Building
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA State Permit Fee
Cert. of Occupancy
Other
Total
Check No.
Cash
Collected by

U.C.C. F170 (rev. 01/04)

(see reverse side)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

AJ 036 Rev 11 06

105559

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued

Permit #

IDENTIFICATION Block 1170.04 Lot 4 Qualification Code

Work Site Location 132 John Street Brick 08724

Owner in Fee Tunnington

Address same

Tel. [redacted]

Contractor **A.J. Perri Inc.**

Address 1138 Pine Brook Road
Tinton Falls, NJ 07724

Tel. (732) 982-8700 Fax (732) 982-8715

Lic. No. or Bldrs. Reg. No. #03463

Is hereby granted permission to perform the following work:

[ ] BUILDING	[X] PLUMBING	[ ] LEAD HAZARD ABATEMENT
[X] ELECTRICAL	[X] FIRE PROTECTION	[ ] DEMOLITION
[ ] ELEVATOR DEVICES	[ ] ASBESTOS ABATEMENT (Subchapter 8 only)	[ ] OTHER

DESCRIPTION OF WORK:

Replace A/C unit, gas furnace, and chimney liner.

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 $ 14,200.-

Construction Official

Date

PAYMENTS (Office Use Only)

Building

Electrical

Plumbing

Fire Protection

Elevator Devices

Other

DCA State Permit Fee

Cert. of Occupancy

Other

Total

Check No.

Cash

Collected by

U.C.C. F170 (rev. 01/04)

(see reverse side)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

AJ 036 Rev 11 06

105534

CONSTRUCTION PERMIT

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Issued

Permit #

IDENTIFICATION Block 1170.04 Lot 4 Qualification Code

Work Site Location 12 John Street

Brick, 08724

Owner in Fee Tunnington

Address Same

Tel. ([redacted]

Contractor **A.J. Perri Inc.**

Address 1138 Pine Brook Road

Tinton Falls, NJ 07724

Tel. (732) 982-8700 Fax (732) 982-8715

Lic. No. or Bldrs. Reg. No. #03463

Is hereby granted permission to perform the following work:

[ ] BUILDING [✓] PLUMBING [ ] LEAD HAZARD ABATEMENT

[X] ELECTRICAL [X] FIRE PROTECTION [ ] DEMOLITION

[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER

DESCRIPTION OF WORK:
replace AC unit, gas furnace, and chimney liner.

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 $ 14,300.-

Construction Official

Date

PAYMENTS (Office Use Only)

Building

Electrical

Plumbing

Fire Protection

Elevator Devices

Other

DCA State Permit Fee

Cert. of Occupancy

Other

Total

Check No.

Cash

Collected by

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

AJ 036 Rev 11 06

CONSTRUCTION PERMIT

Date Issued 05/10/10
Control # C-10-001258
Permit # 10-1055

IDENTIFICATION Block: 1170.04 Lot: 4 Qualifier
Work Site Location: 132 JOHN ST Brick Township, NJ
Owner in Fee TUNNINGTON, THOMAS & BARBARA J
132 JOHN ST BRICK NJ 08724
Telephone: [redacted]

Contractor A J PERRI INC
Address 1138 PINE BROOK ROAD TINTON FALLS NJ 07724
Telephone: (732) 982-8700
Lic. No. or Bldrs. Reg. No. 13VH00346300
Federal Employee. No. 36-4726097

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 A/C, REPLACEMENT HOT AIR FURNACE REPLACE A/C, GAS FURNACE AND CHIMNEY LINER.

Note: If constuction 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 $14,200

Construction Official
Date 4-30-10

PAYMENTS (Office Use Only)

Building	$0
Electrical	$40
Plumbing	$50
Fire Protection	$45
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$24
CO Fee	
Other	$0
Total	$159
Check No.	
Cash	$0
Credit	$0
Collected By	

U.C.C. F170
equiv (rev 8/03)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

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.

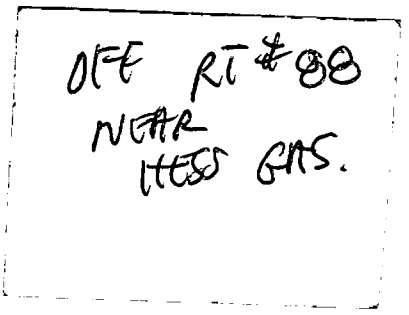
#1055
ELECTRIC $40.00
PLUMBING $50.00
FIRE $45.00
DCA $24.00
$159.00

☐ 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.


OFF RT #88
NEAR
LTESS GAS.

105559

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 10-1055

Date Issued / Permit # 05/10/10

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

Block 1170.04 Lot 4 Qualification Code

Work Site Location 132 John Street Brick 08724

Owner in Fee Lonnington

Address same

Tel [redacted]

Contractor AJ PERRI, INC.

Address 9 JOHNSON STREET
MONMOUTH BEACH, NJ 07750

Tel (732) 982-8700 FAX (732) 982-8715

Contractor License No. 12566

Federal Emp. No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 6,390.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date: 4-29-10

Approved by: wem

SUBCODE APPROVAL

[ ] CO [ ] CCO [X] CA

Date: 6-15-10

Approved by: BW

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final	6/2/10		6/14/10	MP

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's Signature/Contractor's Seal and Signature

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
1	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
1	Other A/C unit	
1	Other furnace	

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

U.C.C. F130 (rev. 01/04)

1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

AJ 020 Rev 2 09

105559

ELECTRICAL SUBCODE
TECHNICAL SECTION

NEW JERSEY UNIFORM CONSTRUCTION CODE

Date Received 10-1055
Control #

Date Issued 05/10/10
Permit #

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

Block 11004 Lot 4 Qualification Code

Work Site Location 132 John Street
Brick 08724

Owner in Fee: Tunnington

[redacted] e-mail N/A

Address June
street municipality zip code

Contractor: RCLE Inc. Tel. (732) 982-8700

Address 9 Ellis Court e-mail
Monmouth Beach, NJ 07750

Contractor License No. Electric License # 7654 Exp. Date

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

Federal Emp. ID No. FAX: (732) 982-8715

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 3,550.-

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: 4-29-10
Approved by: DT

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 6/3/10
Approved by: DT

INSPECTIONS Type:	Failure	Failure	Dates (Month/Day) Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			6-2-10	DD
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's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Replace A/C unit, gas furnace, and chimney liner.

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	
1	7.3	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	
		KW Elec. Sign/Outline Light	
1	100K	BTU furnace	

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

AJ 019 12 09

105559

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 05/10/10
Date Issued
Control # CCO-001258
Permit # 10-1055

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

Block 1170.04 Lot 4
Work Site Location 132 John Street Brick 08724
Owner in Fee Tunnington
Address Same
Tel. [redacted]
Contractor [redacted]
Address 1138 Pine Brook Road
Tinton Falls, NJ 07724
Tele. (732) 982-8700 Fax (732) 982-8715
Lic. No.
Federal Emp. No. 36-427609-7 or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [X] Existing
Type: [X] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ 42,600.- [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] ~~No~~ Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Elec.
[ ] Fire Plans Approved
Date: 4-30-10
Approved by:

SUBCODE APPROVAL:
[ ] CO [ ] CCO [X] CA
Date: 6-8-10
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical			6-8-10	
TCO				
Other found			6/8/10	
Other				
Other				

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.

Greg Johnston
SIGNATURE

D. TECHNICAL SITE DATA

Description of work

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance	1	45
OTHER Chimney liner	1	

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by TOTAL FEE $

U.C.C. Form F-140A
1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy
AJ 023 Rev 05 07

105559

10-1055

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control # ✓
Date Issued 05/10/10
Permit #

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

Block 1170.04 Lot 4 Qualification Code
Work Site Location 132 John Street
Brick 08724
Owner in Fee Lunnington
Address same

[redacted]
Contractor MICHAEL J. PERRI T/A AJ PERRI, INC.
Address 9 JOHNSON STREET
MONMOUTH BEACH, NJ 07750
Tel (732) 982-8700 FAX (732) 982-8715
Contractor License No. 12566
Federal Emp. No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed
Building Sewer Size Public Sewer Private Septic
Water Service Size Public Water Private Well
Est. Cost of Plumbing Work $ 6,590.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[X] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: 11-29-10
Approved by: wem

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				

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's Signature/Contractor's Seal and Signature
[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only) $
	Water Closet	
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
1	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
1	Stacks A/C unit	
1	Other furnace	
	Other	

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

U.C.C. F130
(rev. 01/04)

1 White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy

AJ 020 Rev 2 09

105559

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 10-1055

Date Issued / Permit # ✓ 05/10/10

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

Block 1170.04 Lot 4 Qualification Code

Work Site Location 132 John Street Brick 08724

Owner in Fee Tunnington

Address same

[redacted]

Contractor MICHAEL J. PERRI T/A AJ PERRI, INC.

Address 9 JOHNSON STREET
MONMOUTH BEACH, NJ 07750

Tel (732) 982-8700 FAX (732) 982-8715

Contractor License No. 12566

Federal Emp. No.

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer Private Septic

Water Service Size Public Water Private Well

Est. Cost of Plumbing Work $ 6,390.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[ ] Plumbing Plans Approved

Date: 11-24-10

Approved by: WEM

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS

Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				

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's Signature/Contractor's Seal and Signature

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
1	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
1	Other A/C unit	
1	Other furnace	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

U.C.C. F130 (rev. 01/04)

1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

AJ 020 Rev 2 09

105559

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 10-1055
Control #
Date Issued 05/10/10
Permit #

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

Block 1170.04 Lot 4 Qualification Code

Work Site Location 132 John Street Brick 08724

Owner in Fee: Tunnington [redacted] e-mail N/A

Address same (street / municipality / zip code)

Contractor: RCLE Inc. Tel. (732) 982-8700

Address 9 Ellis Court e-mail

Monmouth Beach, NJ 07750

Contractor License No. Electric License # 7654 Exp. Date

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

Federal Emp. ID No. FAX: (732) 982-8715

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 3,550.-

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: 4-29-10

Approved by: [signature]

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Dates (Month/Day)

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.

[signature]
Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Replace A/c unit, gas furnace, and chimney liner.

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	
1	7.3	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	
		KW Elec. Sign/Outline Light	
1	60K	BTU furnace	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

AJ 019 12 09

105559

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 10-1055
Control #
Date Issued 05/10/10
Permit #

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

Block 110.04 Lot 4 Qualification Code

Work Site Location 132 John Street Brick 08724

Owner Tunnington

Tel. [redacted] e-mail N/A

Address Same
street municipality zip code

Contractor: RCLE Inc. Tel. (732) 982-8700

Address 9 Ellis Court e-mail

Monmouth Beach, NJ 07750

Contractor License No. Electric License # 7654 Exp. Date

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

Federal Emp. ID No. FAX: (732) 982-8715

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 3,550.-

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: 4-29-10

Approved by: OJ

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
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

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's Signature/Contractor's Seal and Signature

[ ] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Replace A/c unit, gas furnace, and chimney liner.

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	
1	7.3	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	
		KW Elec. Sign/Outline Light	
1	100K	BTU furnace	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

AJ 019 12 09

105559

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 05/10/10
Date Issued
Control # CP-001258
Permit # 10-1055

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

Block 170.04 Lot 4
Work Site Location 132 John Street
Brick 08724
Owner in Fee Tunnington
Address same
Tele [redacted]
Contractor A.C. Perri, Inc.
Address 1138 Pine Brook Road
Tinton Falls, NJ 07724
Tele. (732) 982-8700 Fax (732) 982-8715
Lic. No.
Federal Emp. No. 36-427609-7 or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [X] Existing
Type: [X] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ 42600.- [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Elec.
[ ] Fire Plans Approved
Date: 4-30-10
Approved by:

SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

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.

Greg Johnston
SIGNATURE

D. TECHNICAL SITE DATA

Description of work

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance	1	45
OTHER Chimney liner	1	
Administrative Surcharge		$
Paid [ ] Check # Minimum Fee		$
Collected by TOTAL FEE		$

U.C.C. Form F-140A

1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

AJ 023 Rev 05 07

105559

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received 05/10/10
Date Issued
Control # [illegible]
Permit # 10-1055

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

Block 170.04 Lot 4
Work Site Location 132 John Street Brick 08724
Owner in Fee Twanington
Address Same
Tele [redacted]
Contractor A.J. Perri, Inc.
Address 1138 Pine Brook Road
Tinton Falls, NJ 07724
Tele. (732) 982-8700 Fax (732) 982-8715
Lic. No.
Federal Emp. No. 36-427609-7 or Social Security No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present Proposed
Constr. Class. Present Proposed
Heating Systems [ ] New [X] Existing
Type: [X] Gas [ ] Oil [ ] Electrical [ ] Solar
[ ] Other
Location:
Total Est. Cost of Fire Prot. Work $ 4,260.- [ ] Other

JOB SUMMARY (Office Use Only)

PLAN REVIEW:
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Elec.
[ ] Fire Plans Approved
Date: 4-20-10
Approved by:
SUBCODE APPROVAL:
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS: Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Suppression Test				
Fire Alarm Test				
Smoke Test				
Mechanical				
TCO				
Other				
Other				
Other				

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.

Greg Johnston
SIGNATURE

D. TECHNICAL SITE DATA

Description of work

Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision

Flammable Liquid Storage Tanks ( ) Capacity Fuel
Combustible Liquid Storage Tanks ( ) Capacity Fuel
L.P.G. Storage Tanks ( ) Capacity Fuel
L.N.G. Storage Tanks ( ) Capacity Fuel

	Number	FEE (Office Use Only)
Wet Sprinkler Heads		
Dry Sprinkler Heads		
TOTAL		
Smoke Detectors		
Heat Detectors		
TOTAL		
Stand Pipes		
Kitchen Hood Exhaust Systems		
Pre-Engineered Systems		
CO_2 Suppression		
Halon Suppression		
Foam Suppression		
Dry Chemical		
Wet Chemical		
Gas or Oil Fired Appliance	1	45
OTHER Chimney liner	1	

Administrative Surcharge $
Paid [ ] Check # Minimum Fee $
Collected by TOTAL FEE $

U.C.C. Form F-140A
1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy
AJ 023 Rev 05 07

A.J. PERRI, INC.

80157

DATE	INVOICE NO.	COMMENT	AMOUNT	DISCOUNT	NET AMOUNT
5/4/2010	S10559	Tunnington	$159.00	$0.00	$159.00
5/4/2010	80157		$159.00	$0.00	$159.00
BRICK	Brick Township			TOTAL	

CHIMNEY CERTIFICATION
FOR REPLACEMENT OF FUEL FIRED EQUIPMENT

BLOCK 1170.04 LOT 4 QUALIFICATION CODE _____ PERMIT #_____

WORK SITE ADDRESS 132 John Street, Brick

Applicant Tunnington

Certifying Individual Richwolski Company A.J. PERRI, INC.

Address 1138 PINE BROOK ROAD (Street) TINTON FALLS (City) NJ (State) 07724 (Zip Code)

Tel. (800) 287-2164

Check the Appropriate Box

Type of Replacement:

- [ ] Oil to Gas Conversion
- [✓] Gas Appliance Replacement
- [ ] Oil to Oil Replacement
- [ ] Other _____

Existing Vent/Chimney:

- [ ] B Label Vent
- [ ] L Label Vent
- [ ] Masonry Chimney – Tile Lined
- [✓] Flexible Liner
- [✓] Power Vent/Exhauster
- [ ] Other _____

PLEASE SIGN ONE OF THE FOLLOWING CERTIFICATION STATEMENTS

CERTIFICATION

For Oil to Gas Conversions:

I herby certify that the chimney/vent is free and clear of obstruction and is substantially clean of residue from its previous use serving an oil appliance. I further certify that the chimney/vent is appropriately lined and sized for the appliance being installed

Signature _____ Date _____

Oil to Oil or Gas to Gas Replacements:

I hereby certify that the existing chimney/vent is free and clear of obstruction. I further certify that the existing chimney/vent is appropriately lined and sized for the appliance being installed.

Signature _____ Date _____

Certification Not Submitted:

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

Signature _____ Date _____

Direct Vent Appliance:

No certification required:

Signature _____ Date _____

THIS FORM MUST BE RETURNED TO THE CODE ENFORCEMENT OFFICE PRIOR TO FINAL INSPECTION.

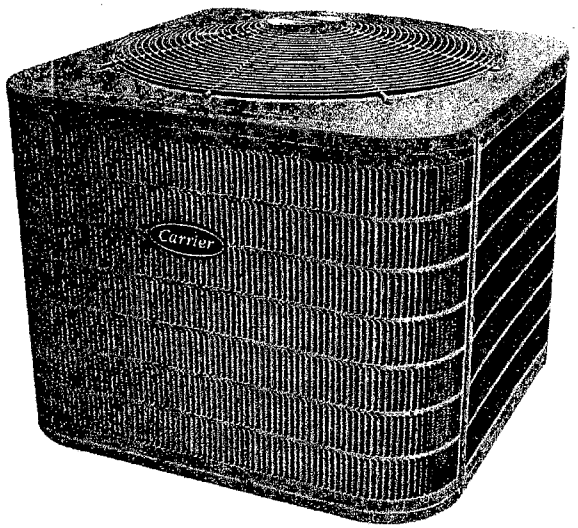
U.C.C. F370 (rev. 3/04)

24APA724

24APA7
Performance™ Series 17 2-Stage Air Conditioner with Puron® Refrigerant
2 to 5 Tons

Carrier®
Turn to the Experts.

Product Data



Puron® the environmentally sound refrigerant

Performance™ SERIES

Carrier's Air Conditioners with Puron® refrigerant provide a collection of features unmatched by any other family of equipment. The 24APA7 has been designed utilizing Carrier's Puron refrigerant. The environmentally sound refrigerant allows you to make a responsible decision in the protection of the earth's ozone layer.

As an Energy Star® Partner, Carrier Corporation has determined that this product meets the Energy Star® guidelines for energy efficiency. Refer to the combination ratings in the Product Data for system combinations that meet Energy Star® guidelines.

NOTE: Ratings contained in this document are subject to change at any time. Always refer to the AHRI directory (www.ahridirectory.org) for the most up-to-date ratings information.

INDUSTRY LEADING FEATURES / BENEFITS

Efficiency

- 17 SEER / 11.5 - 13.0 EER
- Microtube Technology™ refrigeration system
- Indoor air quality accessories available

Sound

- Sound level as low as 72 dBA

Comfort

- System supports Infinity™ Control or standard 2-stage thermostat controls

Reliability

- Puron® refrigerant - environmentally sound, won't deplete the ozone layer and low lifetime service cost.
- Front-seating service valves
- 2-stage scroll compressor
- Internal pressure relief valve
- Internal thermal overload
- Low pressure switch
- High pressure switch
- Filter drier
- Balanced refrigeration system for maximum reliability

Durability

WeatherArmor™ protection package:

- Solid, Durable sheet metal construction
- Steel louver coil guard
- Baked-on, complete outer coverage, powder paint

Applications

- Long-line - up to 250 feet (76.2 m) total equivalent length, up to 200 feet (60.96 m) condenser above evaporator, or up to 80 ft. (24.38 m) evaporator above condenser (See Longline Guide for more information.)

MODEL NUMBER NOMENCLATURE

1	2	3	4	5	6	7	8	9	10	11	12	13
N	N	A	A	A/N	N	N	N	A/N	A/N	A/N	N	N
2	4	A	P	A	7	3	6	A	0	0	3	0
Product Series 24=AC	Product Family A=RES AC		Tier P = Performance	Major Series A=Puron	SEER 7=17 SEER Nominal	Cooling Capacity		Variations A=Standard	Open 0=Not Defined	Open 0=Not Defined	Voltage 3=208/230–1	Minor Series 0, 1, 2...

Puron™ the environmentally sound refrigerant

ARI PERFORMANCE CERTIFIED™ ARI Standard 210/240 Unitary Air Conditioners

ISO 9001:2000 QMI REGISTERED

c UL® us

ENERGY STAR

This product has been designed and manufactured to meet Energy Star® criteria for energy efficiency when matched with appropriate coil components. However, proper refrigerant charge and proper air flow are critical to achieve rated capacity and efficiency. Installation of this product should follow all manufacturing refrigerant charging and air flow instructions. **Failure to confirm proper charge and air flow may reduce energy efficiency and shorten equipment life.**

STANDARD FEATURES

FEATURES	Unit Size – Voltage, Series			
	24–30	36–30	48–30	60–30
Puron Refrigerant	X	X	X	X
Maximum SEER Rating	17.0	18.0	17.5	17.0
2–Stage Scroll Compressor	X	X	X	X
Crankcase Heater w/Temperature Switch	X	X	X	X
Long line Capability	X	X	X	X
Low Ambient Capability to 0°F (–17.8°C) w/Infinity Control	X	X	X	X
Up to 23 Points Diagnostics (w/Infinity Control)	X	X	X	X
Utility Interface Connection	X	X	X	X
Louvered Coil Guard	X	X	X	X
Field Installed Filter Drier	X	X	X	X
Front Seating Service Valves	X	X	X	X
Internal Pressure Relief Valve	X	X	X	X
Internal Thermal Overload	X	X	X	X
Long Line capability	X	X	X	X
Low Pressure Switch	X	X	X	X
High Pressure Switch	X	X	X	X
Sound Blanket	X	X	X	X

X = Standard

ELECTRICAL DATA

Unit Size – Voltage, Series	V/PH	OPER VOLTS*		COMPR		FAN	MCA	MIN WIRE SIZE†	MIN WIRE SIZE†	MAX LENGTH ft. (m)‡	MAX LENGTH ft. (m)‡	MAX FUSE** or CKT BRK AMPS
		MAX	MIN	RLA	LRA	FLA		60° C	75° C	60° C	75° C	
24–30	208/230	187	253	10.30	52.0	0.7	13.58	14.00	14.00	60 (18.3)	57 (17.4)	20
36–30	208/230			16.70	82.0	1.2	22.08	14.00	14.00	45 (13.7)	44 (13.4)	35
48–30	208/230			21.20	96.0	1.3	27.80	12.00	12.00	51 (15.5)	49 (14.9)	40
60–30	208/230			23.00	118.0	1.3	30.06	8.00	10.00	93 (28.3)	57 (17.4)	50

* Permissible limits of the voltage range at which the unit will operate satisfactorily

† If wire is applied at ambient greater than 30°C, consult table 310–16 of the NEC (NFPA 70). The ampacity of non–metallic–sheathed cable (NM), trade name ROMEX, shall be that of 60°C conditions, per the NEC (NFPA 70) Article 336–26. If other than uncoated (no–plated), 60 or 75°C insulation, copper wire (solid wire for 10 AWG or smaller, stranded wire for larger than 10 AWG) is used, consult applicable tables of the NEC (NFPA 70).

‡ Length shown is as measured one way along wire path between unit and service panel for voltage drop not to exceed 2%.

** Time–Delay fuse.

FLA – Full Load Amps

LRA – Locked Rotor Amps

MCA – Minimum Circuit Amps

RLA – Rated Load Amps

NOTE: Control circuit is 24–V on all units and requires external power source. Copper wire must be used from service disconnect to unit. All motors/compressors contain internal overload protection.

Complies with 2007 requirements of ASHRAE Standards 90.1

A-WEIGHTED SOUND POWER (dBA)

Unit Size – Voltage, Series	Standard Rating (dBA)	TYPICAL OCTAVE BAND SPECTRUM (dBA, without tone adjustment)					
		125	250	500	1000	4000	8000
24 – 30	71 – low stage	49.4	61.4	60.8	61.5	55.5	46.9
	72 – high stage	49.9	58.4	61.8	60.0	56.0	50.4
36 – 30	72 – low stage	48.9	57.9	64.3	62.0	55.5	50.9
	74 – high stage	49.4	59.4	62.3	64.0	56.5	52.4
48 – 30	74 – low stage	53.9	63.9	61.8	64.0	56.0	47.9
	74 – high stage	52.9	60.9	61.8	64.0	60.0	48.9
60 – 30	73 – low stage	51.9	58.9	65.3	61.5	55.0	48.4
	73 – high stage	52.4	61.4	62.3	64.0	56.0	49.9

NOTE: Tested in accordance with AHRI Standard 270–08. (Not listed with AHRI).

CHARGING SUBCOOLING (TXV-TYPE EXPANSION DEVICE)

UNIT SIZE–VOLTAGE, SERIES	REQUIRED SUBCOOLING °F (°C)
24–30	10 (5.6)
36–30	10 (5.6)
48–30	10 (5.6)
60–30	10 (5.6)

CONTROLS / THERMOSTATS

Infinity Controls	DESCRIPTION
SYSTXCCUIZ01–A	Infinity System Zone Control User Interface
SYSTXCCUID01–A	Infinity System Non–Zone Control User Interface

THERMOSTAT / SUBBASE PKG.	DESCRIPTION
TP–PRH01–A	Programmable Thermidistat
TP–NRH01–A	Non–programmable Thermidistat
TP–PHP01*	Performance Series Programmable HP Stat
TP–NHP01*	Performance Series Non–programmable HP Stat
TC–PHP01*	Comfort Series Programmable HP Stat
TC–NHP01*	Comfort Series Non–programmable HP Stat

*Serial numbers beginning with 2909 and thereafter.

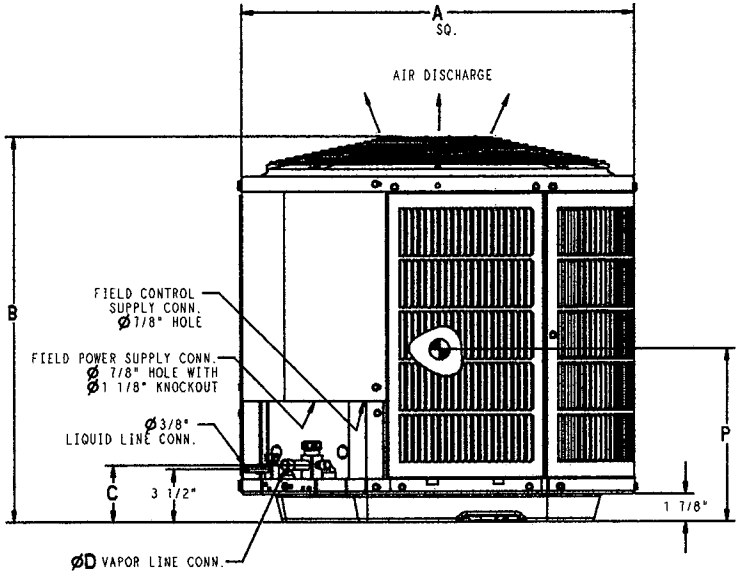
DIMENSIONS - ENGLISH

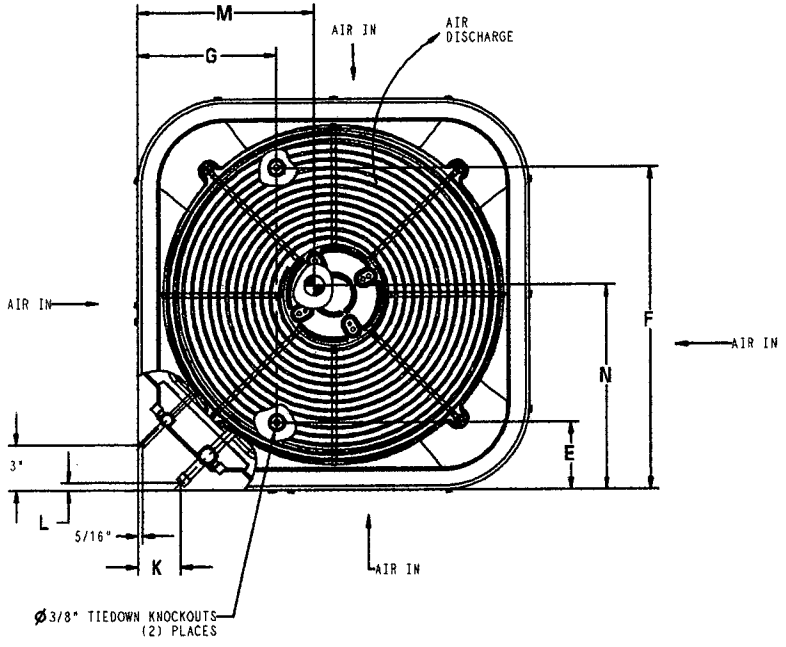
UNIT	SERIES	ELECTRICAL CHARACTERISTICS				A	B	C	D	E	F	G	K	L	M	N	P	OPERATING WEIGHT (lbs)	SHIPPING WEIGHT (lbs)	SHIPPING DIMENSIONS (L x W x H)
		208-230-1-60	230-1-60	208/230-3-60	460-3-60															
24APA724	0	X	0	0	0	31 3/16"	39 1/8"	3 7/8"	3/4"	6 9/16"	24 11/16"	9 1/8"	2 15/16"	5/8"	14 1/4"	17 1/4"	19 1/4"	204	243	32 3/8" X 35 1/2" X 42 3/4"
24APA736	0	X	0	0	0	31 3/16"	39 1/8"	3 7/8"	7/8"	6 9/16"	24 11/16"	9 1/8"	2 15/16"	5/8"	14 1/4"	17 1/4"	19 1/4"	204	243	32 3/8" X 35 1/2" X 42 3/4"
24APA748	0	X	0	0	0	35"	39 1/8"	3 7/8"	7/8"	6 9/16"	28 7/16"	9 1/8"	2 15/16"	5/8"	18"	17 1/2"	19 1/2"	308	363	36 1/8" X 39 5/16" X 42 3/4"
24APA760	0	X	0	0	0	35"	45 7/8"	3 7/8"	7/8"	6 9/16"	28 7/16"	9 1/8"	2 15/16"	5/8"	17 7/8"	18 5/8"	20 1/4"	316	373	36 1/8" X 39 5/16" X 46 3/16"

X = YES
O = NO

NOTES:

1. Allow 24" clearance to service side of unit, 48" above unit, 6' on one side, 12' on remaining side.
2. Minimum outdoor operating ambient in cooling mode is 55°F, max. 125°F.
3. Series designation is the 13th position of the unit model number.
4. Center of gravity ⊕.
5. All dimensions are in "inches" unless otherwise noted.





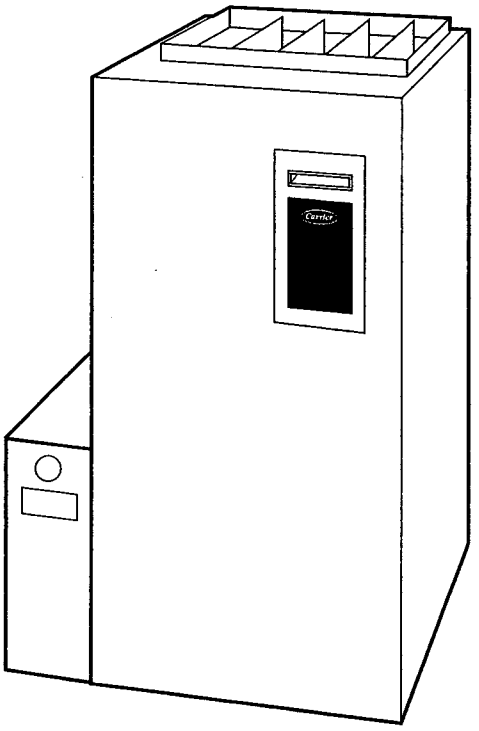
UNIT SIZE	MINIMUM MOUNTING PAD DIMENSIONS
24, 36	31 1/2" X 31 1/2"
48, 60	35" X 35"

58MVC060

INFINITY™ ICS MODEL 58MVC
DELUXE 4–WAY MULTIPOISE VARIABLE–SPEED MULTI–STAGE CONDENSING GAS FURNACE
Series 100 Input Rates: 60,000 thru 120,000 Btuh

Carrier®
Turn to the Experts.

Product Data



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IdealComfort IdealHumidity

IdealComfort™ technology, the ultimate in heating comfort . . .

The Carrier Infinity™ ICS with IdealComfort™ technology achieves the optimum combination of comfort and efficency.

The Infinity™ ICS achieves industry-leading ultra-high efficiency at up to 95 percent Annual Fuel Utilization Efficiency (AFUE). Efficient performance is enhanced through the variable-speed design. To optimize heating performance, IdealComfort™ automatically adjusts the heating level, maximizing the use of low heating levels that produce near silent furnace operation while meeting the exact heating needs. This unit is designed to keep the indoor temperature within less than 1 degree of the thermostat setpoint. Because it operates in low heat most of the time, the Infinity™ ICS uses up to 80% less power than single-capacity furnaces.

In addition to providing ultimate comfort, the Infinity™ ICS has a sealed combustion system. This system brings combustion air to the furnace and vents flue gases outside the furnace in a safe manner. Because it is sealed, operational noise is minimal. A sealed combustion system also means fewer cold drafts and less air infiltration.

Quality materials are the key behind the Infinity™ ICS's outstanding performance. Carrier stands behind quality. We offer lifetime warranty protection* on the heat exchangers, the heart of the Infinity™ ICS. The rest of the furnace is backed by a limited 5-year warranty.

The Infinity™ ICS is available in 5 heat/airflow combinations. The unit has a 4-way multipoise design and can be installed in upflow, downflow, or horizontal positions covering up to 20 different applications. The Infinity™ ICS can be vented as a Direct vent/2-pipe furnace or as an optional ventilated combustion air application.

The versatile 4-way multipoise design in conjunction with variable speed makes the Infinity™ ICS ideal for use with split system cooling, including 2-speed units. A Carrier Infinity™ air purifier, humidifier, comfort ventilator, and Infinity™ Zone control will provide year round comfort and efficiency.

Designed for durability, comfort, and reliability, the Infinity™ ICS is the ultimate in versatile, efficient comfort.

Carrier Infinity® System — When the Infinity™ ICS variable-speed gas furnace is matched with the Infinity™ Control (-B release is compatible) and an air conditioner or heat pump, the homeowner will experience the ultimate in IdealComfort™ and IdealHumidity™ through unparalleled control of temperature, humidity, indoor air quality, and zoning. The Carrier Infinity™ System also provides unprecedented ease of use through onscreen, text-based service reminders and equipment malfunction alerts.

PHYSICAL DATA

DESCRIPTION	UNIT SIZE				
	060–14	080–14	080–20	100–20	120–20
Direct–Drive Motor Hp (ECM)	1/2	1/2	1	1	1
Motor Full Load Amps	7.7	7.7	12.8	12.8	12.8
RPM (Nominal)—Speeds	Variable 250 — 1300				
Blower Wheel Diameter X Width (in.)	10 X 7	11 X 10	11 X 10	11 X 10	11 X 10
Filter Size (in.) Nominal A (Washable)	(1) 16 X 25 X 1	(1) 20 X 25 X 1	(1) 20 X 25 X 1	(1) 20 X 25 X 1	(1) 24 X 25 X 1
Shipping Weight (lb)	170	182	204	203	234
Limit Control	SPST				
Heating Blower Control (Off Delay)	Selectable 90, 120, 150, or 180 SEC Intervals				
Burners (Monoport)	3	4	4	5	6
Gas Connection Size	1/2–in. NPT				
Gas Valve (Redundant) Manufacturer Minimum Inlet Pressure (in. wc) Maximum Inlet Pressure (in. wc)	White–Rodgers 4.5 (Natural Gas) 13.6 (Natural Gas)				
Ignition Device	Hot Surface –SiN				

58MVC

PERFORMANCE DATA

UNIT SIZE			060–14	080–14	080–20	100–20	120–20
CERTIFIED TEMP RISE RANGE (°F)		Low	35 – 65	35 – 65	35 – 65	40 – 70	35 – 65
		Medium	50 – 80	50 – 80	50 – 80	50 – 80	50 – 80
		High	35 – 65	40 – 70	35 – 65	45 – 75	45 – 75
CERTIFIED EXT STATIC PRESSURE (ESP)		Heating	0.12	0.15	0.15	0.20	0.20
		Cooling	0.50	0.50	0.50	0.50	0.50
AIRFLOW CFM‡		Heating Low	410 (470**)	540 (620**)	525 (605**)	660 (760**)	890 (1025**)
		Heating Medium	545 (625**)	695 (800**)	685 (790**)	875 (1005**)	1095 (1260**)
		Heating High	1070	1220	1470	1510	1900
		Cooling (Max)	1400	1375	1975	1950	2060
OUTPUT CAPACITY BTUH* (ICS)	Low	Upflow	22000	30000	30000	38000	46000
		Downflow	23000	30000	30000	38000	46000
		Horizontal	21000	30000	30000	38000	45000
	Medium	Upflow	37000	49000	49000	61000	73000
		Downflow	36000	49000	49000	61000	73000
		Horizontal	36000	49000	49000	61000	73000
	High	Upflow	56000	74000	74000	94000	112000
		Downflow	56000	74000	74000	94000	112000
		Horizontal	56000	74000	74000	93000	112000
AFUE%* Nonweatherized ICS		Upflow	95.0	95.0	95.0	95.0	95.0
		Downflow	92.1	92.3	92.3	93.5	93.3
		Horizontal	94.0	94.7	94.7	94.8	93.8
INPUT BTUH†		Low	24000	32000	32000	40000	48000
		Medium	39000	52000	52000	65000	78000
		High	60000	80000	80000	100000	120000

* Capacity in accordance with U.S. Government DOE test procedures.
† Gas input ratings are certified for elevations to 2000 ft. For elevations above 2000 ft, reduce ratings 2% for each 1000 ft above sea level. In Canada, derate the unit 5% for elevations from 2000 to 4500 ft above sea level.
‡ Airflow shown is for bottom only return–air supply with factory–supplied 1–in. washable filter(s). For air delivery above 1800 CFM, see Air Delivery Table for other options.
** Low– and Medium–heat CFM when low/medium heat rise adjustment switch (SW1–3) on furnace control is used.

ELECTRICAL DATA

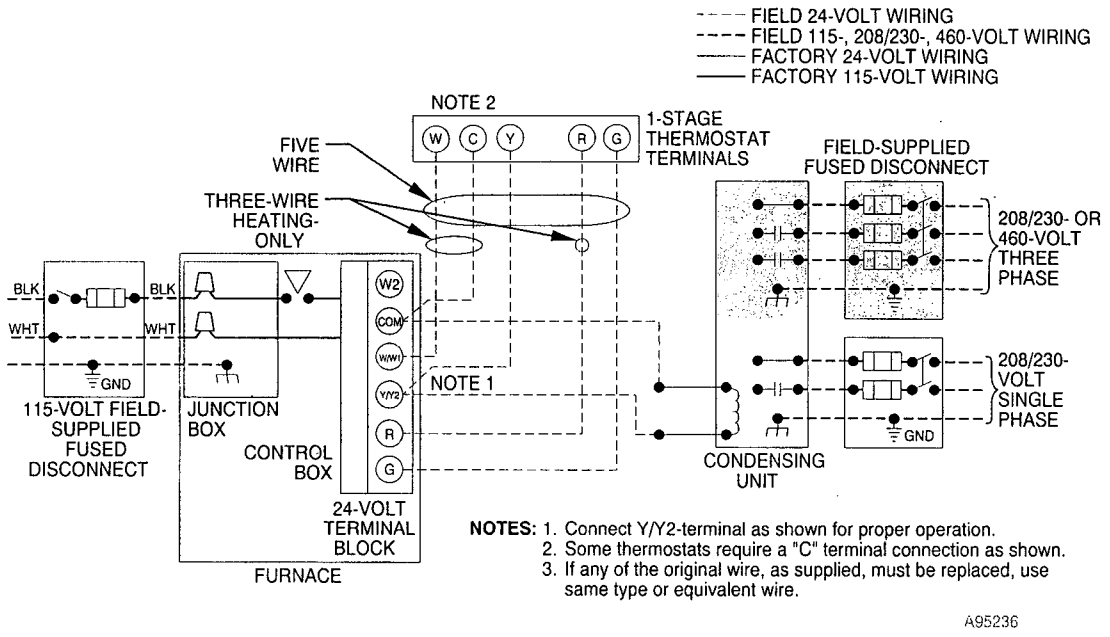
UNIT SIZE		060–14	080–14	080–20	100–20	120–20
UNIT VOLTS – HERTZ – PHASE		115 – 60 – 1				
OPERATING VOLTAGE RANGE (Min – Max)*		104 – 127				
MAXIMUM UNIT AMPS		8.96	8.96	14.06	14.06	14.06
MINIMUM WIRE SIZE		14	14	12	12	12
MAXIMUM WIRE LENGTH (Ft)‡		30	30	31	31	31
MAXIMUM FUSE OR CKT BKR (Amps)**		15	15	20	20	20
TRANSFORMER (24v)		40va				
EXTERNAL CONTROL POWER AVAILABLE	Heating	18va				
	Cooling	34va				

*Permissible limits of the voltage range at which the unit will operate satisfactorily.

‡Length shown is as measured one way along wire path between unit and service panel for maximum 2% voltage drop.

**Time–delay type is recommended.

58MVC



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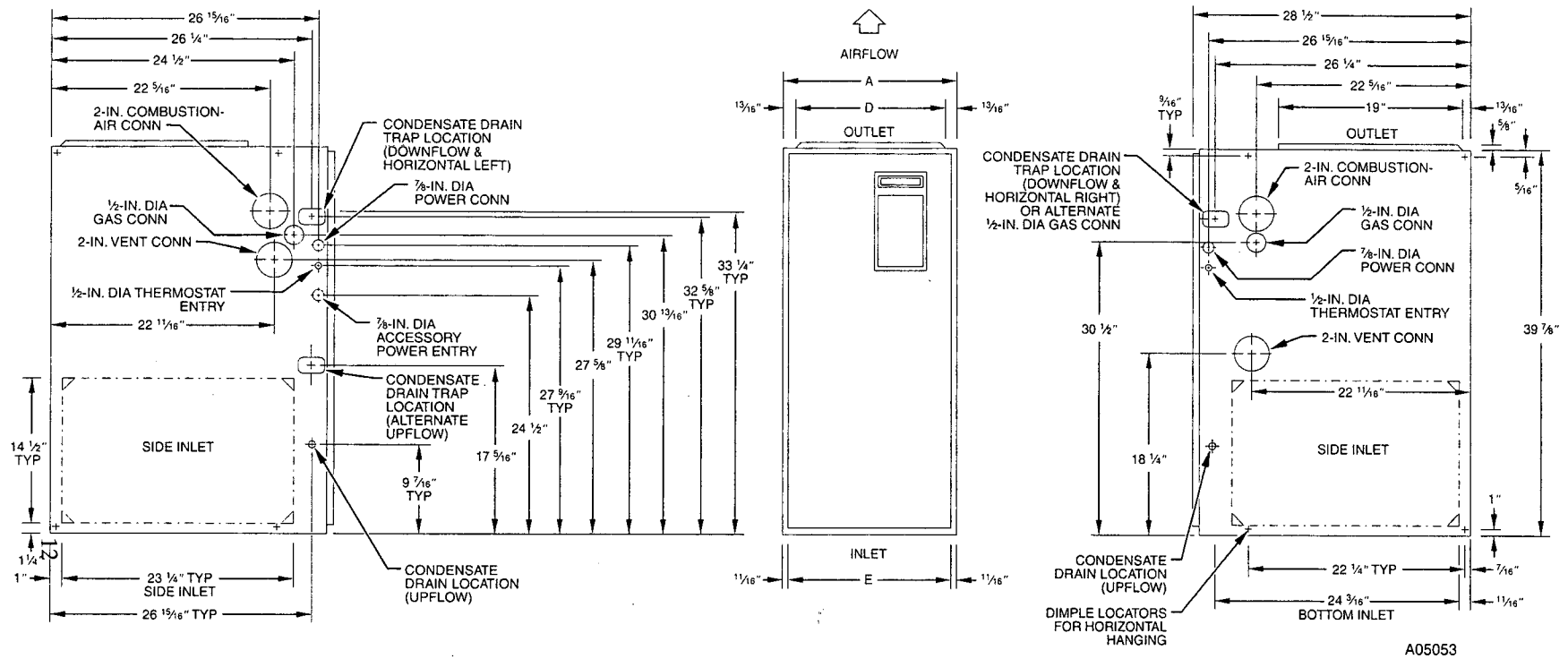
Typical Wiring Schematic



NOTES: 1. Minimum return-air openings at furnace, based on metal duct. If flex duct is used, see flex duct manufacturer's recommendations for equivalent diameters.

2. Minimum return-air opening at furnace:
   a. For 800 CFM–16-in. round or 14 1/2 x 12-in. rectangle.
   b. For 1200 CFM–20-in. round or 14 1/2 x 19 1/2-in. rectangle.
   c. For 1600 CFM–22-in. round or 14 1/2 x 23 1/4-in. rectangle.
   d. For airflow requirements above 1800 CFM, see Air Delivery table in Product Data literature for specific use of single side inlets. The use of both side inlets, a combination of 1 side and the bottom, or the bottom only will ensure adequate return air openings for airflow requirements above 1800 CFM at 0.5 W.C. ESP.

DIMENSIONS (IN / MM)			
UNIT SIZE	**A**	**D**	**E**
060–14	17–1/2 / 444.5	15–7/8 / 403.3	16 / 406.4
080–14	21 / 533.4	19–3/8 / 492.2	19–1/2 / 495.3
080–20	21 / 533.4	19–3/8 / 492.2	19–1/2 / 495.3
100–20	21 / 533.4	19–3/8 / 492.2	19–1/2 / 495.3
120–20	24–1/2 / 622.3	22–7/8 / 581.0	23 / 584.2

National Chimney Supply, Inc. #MH25531

280 Commerce Street
Williston, VT 05495

2147C Fletcher Ave.
Indianapolis, IN 46203

2601 Emory Road Bldg. #4
Finksburg, MD 20895

4219 Howard Ave.
Kensington, MD 20895

INSTALLATION INSTRUCTIONS FOR M-FLEX MODEL CB & AL STAINLESS STEEL CHIMNEY LINERS

M-Flex Stainless Steel Chimney Liner are manufactured by National Chimney Supply, Inc. This lining systems is designed and listed to be installed with in masonry chimneys used to vent the products of combustion produced by heating appliances that burn oil, gas, or solid fuels.

This liner should be installed by a nationally certified chimney sweep or other qualified chimney professional.

Each installation must be planned for the best performance of the appliance being installed. Refer to appliance manufacturer's instructions to determine any special venting requirements for specific appliance.

The installer must contact the local building and fire code officials to determine any installation and inspection requirements. Building permits may be required before installation. M-Flex CB and AL liner must be installed with in the local building codes. Please remember, regardless of national codes, the local building inspectors have ultimate jurisdiction.

Do not use any materials or components other than specified in these installation instructions.

MATERIALS NEEDED TO INSTALL M-FLEX STAINLESS STEEL LINER:

	316L		Al294C
316	Two piece or one piece tee	AL	Two piece or one piece tee
	Tee Cap		Tee Cap
	90 Deg. or 45 Deg elbow:		90 Deg or 45 Deg elbow
	Coupler		Coupler
304	Top plate	304	Top plate
	Top Support Clamp } or Top Kit		Top Support Clamp } or Top Kit
	Storm Collar		Storm Collar
	Liner Rain Cap		Liner Rain Cap

INSULATION MATERIALS (if applicable)

Part #	Description
PW4	Premier Wrap 1/4" Foil Faced Ceramic Wool Blanket
PW2	Premier Wrap 1/2" Foil Faced Ceramic Wool Blanket
PM	Premier Mesh Protective Wire Mesh Sleeve
Foil	Aluminum Foil Tape
FA1540 (large/small)	Mesh Clamp
PRMIX	Premier Mix

1.) INSPECTION AND PREPARATION OF CHIMNEY

The existing chimney must meet the following codes for proper construction and compliance requirements before the liner can be installed:

* The chimney must be a minimum of ten feet high, and a maximum of one hundred feet in height.
* The chimney must have the proper wall thickness, ie: minimum of 4 inches (nominal) solid masonry units.
* The chimney must extend at least three feet above the highest point where it penetrates the roof structure, and at least two feet higher than any portion of the building or adjoining structures with in ten feet.
* If the chimney is constructed inside the structure a minimum of two inches of unobstructed air space must surround the chimney to any combustible material. If the chimney is constructed on the outside of the structure, one inch of unobstructed air space must be maintained between the chimney and all other combustible materials.
* When the chimney passes through an floor, ceiling, or other horizontal or vertical structure, fire stops of a non-combustible material must be used.

****IF THE PROPER CLEARANCES LISTED ABOVE CANNOT BE DETERMINED THE LINER MUST BE INSTALLED WITH A *UL LISTED* CHIMNEY INSULATION****

* Do not connect any appliance that burns a liquid fuel to a chimney liner used to vent a solid fuel burning appliance.
* The connector pipe used to connect the appliance to the chimney liner must meet proper clearances to combustibles as determined by the appliance manufacturer's installation instructions, the national building code, or the local building code, which ever is in force.
* Before the liner is installed the chimney must be cleaned thoroughly to remove all deposits of soot, creosote, or glazed creosote. A proper inspection must be done to determine that the chimney is structurally sound. If the structural integrity of the chimney is found to be in question, ie: missing, loose, or cracked masonry or mortar joints, repairs must be made before installation of the chimney liner.

2.) SIZING THE PROPER LINER DIAMETER

* For solid fuel burning appliances the cross sectional area of the liner shall not be less than the cross sectional area of the appliance outlet collar. The cross sectional area of the flue shall not be more than three times the cross sectional area of the appliance outlet collar. For solid fuel burning fireplaces the liner should be at least one-tenth the square inches of the square inches of the fireplace opening. **Please note that this formula can vary based on height of the chimney and other determining factors. Call National Chimney Supply, Inc. should you have any questions.**
* For liner sizing of gas and oil burning appliances please refer to N.F.P.A 54 for gas and N.F.P.A31 for oil. Also refer to appliance manufacturer's instructions. **Incorrectly sized liners for these appliances can lead to performance problems and condensation with in the lining system. Please call National Chimney Supply, Inc. should you have any questions.**

3.) DETERMINE IF THE CORRECT SIZE LINER WILL FIT INTO THE CHIMNEY

* The M-Flex Stainless Steel Chimney Liner can be installed with in the existing flue tile or the flue tile can be removed. It is extremely important that the correct size liner will fit into the chimney. Certain factors, such as chimney construction and offsets in the chimney, may change the size of the interior of the chimney. It is best to prove the interior of the chimney before trying to install the chimney liner.
* This can be done by lowering a short piece of the intended size liner down the chimney to see if it will pass all the way to the bottom. You can also use a liner guide cone to accomplish this. If the chimney liner will need to be insulated this will effect the required dimensions needed to install the liner. If the round configurations needed to vent the appliance will not fit the liner may be formed to an oval configuration to fit, however ovalizing the liner will change the cross sectional area. **Please call National Chimney Supply, Inc. with any questions.**

4.) INSTALLING M-FLEX STAINLESS STEEL CHIMNEY LINER

* Make sure the thimbles to be used in the installation are in the proper chimney to maintain the required clearance to combustibles for the connector pipe from the appliance. If the clearances are not correct reconstruct the thimble to the proper position.
* Determine the length of the liner by measuring from the bottom most thimble to the top of the chimney. To this measurement add approx. Six inches to accommodate the crown and top hardware. Cut liner to length.
* Remove the snout from the two part tee and attach the tee body to liner with either stainless steel pop rivets, or stainless steel screws. If the liner is going to be insulated with a ceramic wool blanket, install the blanket now. If a tee cap is going to be used attach it to the body now.
* Take the tee snout that was removed from the tee body and extend the draw band completely, slide the tee snout into the thimble with the draw band centered in the flue. Lower the liner down from the top of the chimney, and feed the tee body through the draw band on the tee snout. You may have to rotate the liner to align the hole in the tee body with the snout. Once you have aligned the tee tighten the draw band to secure the snout to the tee body.
* Seal the area around the tee snout with mortar to form an airtight seal.
* At the top of the chmney there are 2 Options to seal and support the liner: **Option 1** is to install a top kit. This is accomplished by first removing the rain cap portion of the kit by loosening the top worm drive clamp a few turns. Next, install the plate assembly over the liner, tighten the worm drive screw until snug, then attach the plate to the masonry with silicone or tapcons. Cut the liner flush with the top of the assembly and reinstall the rain cap portion of the top kit. **Option 2** is to install a top plate, top support clamp, and storm collar. Place the hole in the top plate around the liner and center the liner and top plate on top of the chimney, secure to chimney top with masonry screws, silicone or mortar. Attach the support clamp around liner and secure. Place a bead of silicone around top of storm collar to seal. Install rain cap on top of liner and secure.
* To facilitate inspection and cleaning, wall penetrations shall not be placed directly behind the heating appliance.

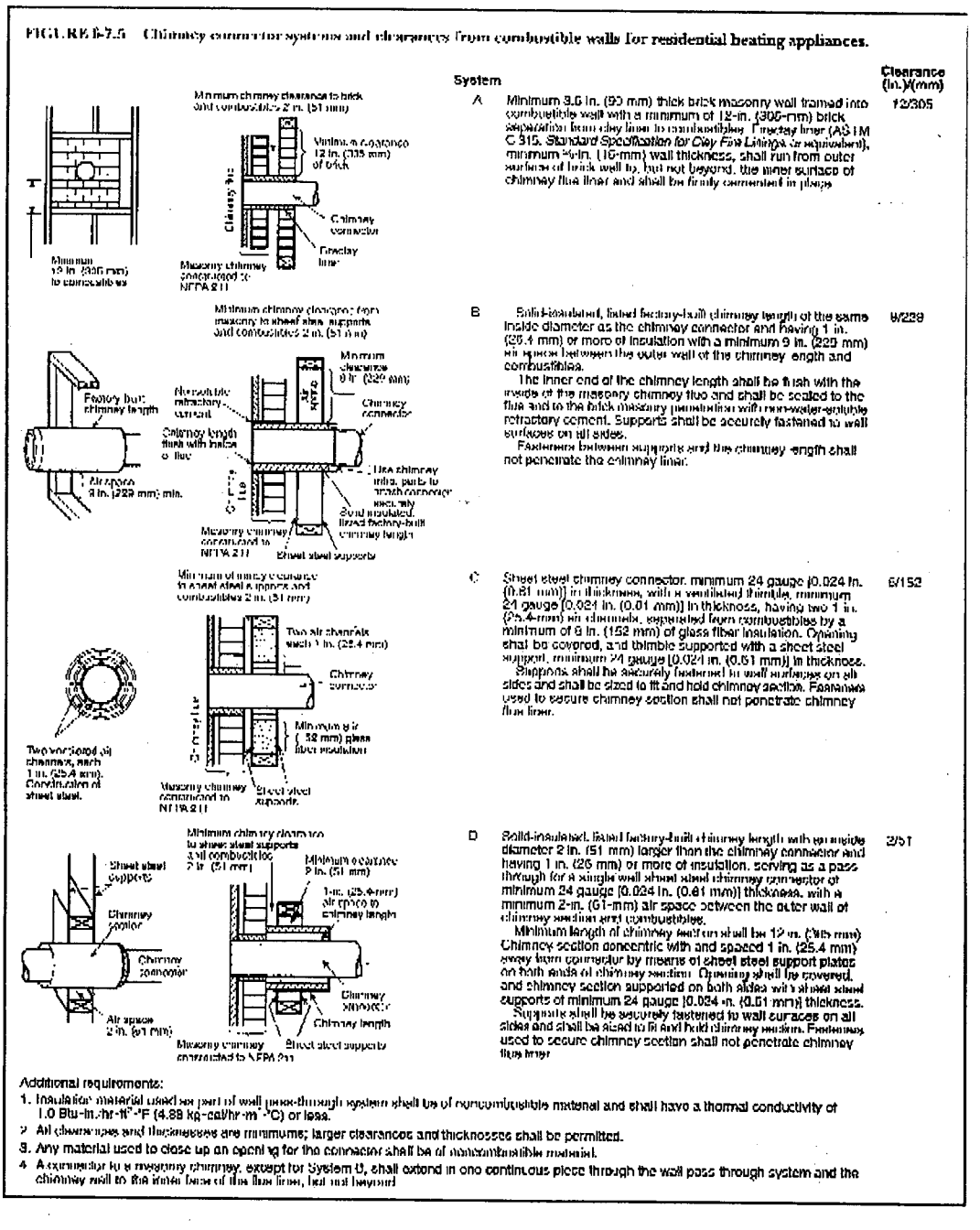


FIG. RE 1-7.5 Chimney connector systems and clearances from combustible walls for residential heating appliances.

System		Clearance (in.)/(mm)
A	Minimum 3.6 in. (90 mm) thick brick masonry wall framed into combustible wall with a minimum of 12-in. (305-mm) brick separation from clay liner to combustibles. Firaclay liner (ASTM C 315, *Standard Specification for Clay Flue Linings* or equivalent), minimum ½-in. (13-mm) wall thickness, shall run from outer surface of brick wall to, but not beyond, the inner surface of chimney flue liner and shall be firmly cemented in place.	12/305
B	Solid-insulated, listed factory-built chimney length of the same inside diameter as the chimney connector and having 1 in. (25.4 mm) or more of insulation with a minimum 9 in. (229 mm) air space between the outer wall of the chimney length and combustibles. The inner end of the chimney length shall be flush with the inside of the masonry chimney flue and shall be sealed to the flue and to the brick masonry penetration with noncombustible refractory cement. Supports shall be securely fastened to wall surfaces on all sides. Fasteners between supports and the chimney length shall not penetrate the chimney liner.	9/229
C	Sheet steel chimney connector, minimum 24 gauge [0.024 in. (0.61 mm)] in thickness, with a ventilated thimble, minimum 24 gauge [0.024 in. (0.61 mm)] in thickness, having two 1 in. (25.4-mm) air channels, separated from combustibles by a minimum of 8 in. (152 mm) of glass fiber insulation. Opening shall be covered, and thimble supported with a sheet steel support, minimum 24 gauge [0.024 in. (0.61 mm)] in thickness. Supports shall be securely fastened to wall surfaces on all sides and shall be sized to fit and hold chimney section. Fasteners used to secure chimney section shall not penetrate chimney flue liner.	6/152
D	Solid-insulated, listed factory-built chimney length with an inside diameter 2 in. (51 mm) larger than the chimney connector and having 1 in. (25 mm) or more of insulation, serving as a pass through for a single wall sheet steel chimney connector of minimum 24 gauge [0.024 in. (0.61 mm)] thickness, with a minimum 2-in. (51-mm) air space between the outer wall of chimney section and combustibles. Minimum length of chimney section shall be 12 in. (305 mm). Chimney section concentric with and spaced 1 in. (25.4 mm) away from connector by means of sheet steel support plates on both ends of chimney section. Opening shall be covered, and chimney section supported on both sides with sheet steel supports of minimum 24 gauge [0.024 in. (0.61 mm)] thickness. Supports shall be securely fastened to wall surfaces on all sides and shall be sized to fit and hold chimney sections. Fasteners used to secure chimney section shall not penetrate chimney flue liner.	2/51

Additional requirements:

1. Insulation material used as part of wall pass-through system shall be of noncombustible material and shall have a thermal conductivity of 1.0 Btu-in./hr-ft²-°F (4.88 kg-cal/hr-m-°C) or less.
2. All clearances and thicknesses are minimums; larger clearances and thicknesses shall be permitted.
3. Any material used to close up an opening for the connector shall be of noncombustible material.
4. A connector to a masonry chimney, except for System D, shall extend in one continuous piece through the wall pass through system and the chimney wall to the inner face of the flue liner, but not beyond.

5.) INSTALLING M-FLEX STAINLESS STEEL LINER FOR A FIREPLACE

* When installing a liner for a fireplace application no tee is used on the bottom of the liner. Instead a base plate is used to seal the liner at the top of the smoke chamber. The base plate can be installed by working up through the damper opening or by removing bricks in the face of the fireplace at the level of the top of the smoke chamber.
* Installing the base plate from the damper opening is accomplished by sliding the liner down into the smoke chamber from the top of the

chimney. Put the base plate up through the damper opening and around the bottom of the liner. Secure the base plate to the liner with stainless steel rivets, stainless steel screws, or a support clamp below the base plate. Once base plate is secured pull liner up and seat base plate on top of smoke chamber. At this point hold liner in place by pushing 2x4 tee up through damper and across bottom of liner. Install top hardware at top of chimney as described in previous section.

* To install the base plate through the face of the fireplace will require more work and masonry skill. Start by removing two to four bricks in either the face or the back of the fireplace at the level of the top of the smoke chamber. If the smoke chamber is constructed correctly there should be approx. eight inches of masonry to go through. Once this opening has been accomplished slide the base plate into the hole over the top of smoke chamber. Slide the liner down from the top of the chimney and through the hole in the base plate. Secure with stainless steel rivets, stainless steel screws, or place a support clamp on the liner above the base plate. This will keep the liner from sliding down through the base plate until the top hardware has been installed. Once this is complete install top hardware as described in previous section. Seal hole in masonry with like material.

6.) INSULATING M-FLEX STAINLESS STEEL CHIMNEY LINER

A note about insulating stainless steel chimney liners: Not all situations require insulation of the chimney liner. The UL1777 Standard for installing stainless steel chimney liners require insulation because the **non-code conforming** chimney has zero clearance to combustibles or some other defect. Thus the UL1777 Standard is in place for fire protection. The definition of a **code Conforming** chimney is one that meets or exceeds N.F.P.A.211 for construction of chimneys, ie: proper clearances to combustibles, intact 5/8 fireclay flue liner or equivalent, minimum four inch (nominal) solid chimney wall. If the chimney meets the requirement for code conforming the only reason to reline would be for appliance performance. In case of relining for high efficiency gas or oil fired appliances (over 83%) no insulation may be required. However regardless of existing chimney, insulating the chimney liner will improve the performance of the appliance that is connected to it. Because the insulated liner will stay warmer the flue will not cool as quickly and will not condense as rapidly. In wood burning appliances this will reduce the amount of creosote that will form in the liner. In oil and gas burning applications the likelihood of condensation, especially on start up of the appliance will greatly reduce. While fire protection is the main concern, insulating liners even if not required will pay dividends by increasing performance and efficiency.

* **Please Note:** For the installed liner system to meet UL standards, all UL listed components used must be installed with proper clearances.

THERE ARE TWO METHODS OF INSULATING M-FLEX STAINLESS STEEL LINERS

Method #1 - Insulating with Premier Mix

* Premier Mix is poured into the chimney around the liner after the liner is installed. Premier Mix is premixed and water is added to the mix at the job site. To determine the amount of Premier Mix needed to insulate a specific liner please call **National Chimney Supply, Inc..**
* No minimum thickness of Premier Mix around a liner installed in a **code-conforming** chimney is required. The required clearance between the liner and the interior of the masonry chimney is 1" inches. In a **non-code conforming** chimney, ie: zero clearance to combustibles, no flue liner, etc. the minimum recommended thickness of Premier Mix is One inch. The required clearance between the insulation and the interior wall of the masonry chimney is 0" inches.
* Premier Mix is mixed with two to three gallons of water in a mortar pan or wheelbarrow. When mixed correctly the Premier Mix will have a grainy consistency and little or no water will come out when squeezed in your hand. Once mixed the Premier Mix is poured into the chimney around the liner. The liner should be vibrated during the pouring process to help the Premier Mix settle around the liner. Continue to pour Premier Mix until the chimney is full to the top. Install top hardware as described in previous section.
* A Premier Mix insulated M-Flex liner can be used after the installation is complete. Curing of the mix will occur over approximately 28 days, with approximately 70% of the curing process occurring in the first week. Drying time of the Premier Mix will depend on the thickness of the mix and the absorption of the masonry chimney. Drying time will be accelerated by using the heating appliance.

Method #2 - Insulating with Premier Wrap

Premier Wrap is installed around the liner **before** it is installed in the chimney.

* Premier Wrap is one half inch thick and one quarter inch thick, eight pound density, ceramic wool blanket with a three mil aluminum foil face. Aluminum tape, retractable wire mesh, and mesh clamps will be needed to complete the installation. Premier Wrap is available in four widths, 24" to fit liners 4" to 6" diameters, 30" to fit 7" to 8" diameters, 36" to fit 9" to 10" diameters, and 48" to fit 11" to 14" diameters.
* In a **code-conforming** chimney no Premier Wrap insulation is required. In a **code-conforming** chimney that must have the tiles removed a single one quarter inch Premier Wrap is required. In a **non-code conforming** chimney a single one-half inch Premier Wrap is required. The required clearance between the insulation and the interior of the masonry chimney is 0" inches.
* To install Premier Wrap onto the liner, lay the blanket open with the foil side down. Cut blanket length wise so that it will overlap approx. one inch. Place liner on blanket and wrap around liner. Run foil tape the complete length of the seam on the blanket, next cut pieces of foil tape approx. eight inches long, and tape across seam about every foot. Next place liner into retractable mesh sock. Using mesh clamp, clamp at end of liner just above tee body. Pull retractable mesh sock to top of liner, continue to pull until mesh sock has retracted tightly around the liner, clamp mesh at top and cut off excess mesh. Install liner as described in previous section.

7.) INSPECTION AND MAINTENANCE INSTRUCTIONS

Should you have any questions concerning inspection and maintenance of the M-Flex liner
Please contact:

National Chimney Supply, Inc.
Corporate Headquarters
280 Commerce St.
Williston, VT 05495
(800) 897-8481

* Inspection of the M-Flex liner should be done at minimum, once per year, at no more than 12 month intervals from date of installation. If the liner is used to vent a solid fuel burning appliance inspections should be done at intervals of every 2 months during the heating season. Upon inspection, if soot or creosote accumulations have reached a 1/4" or more the liner should be cleaned. This inspection and cleaning should be carried out by a nationally certified chimney sweep, or other qualified chimney professionals.

CREOSOTE-FORMATION AND NEED FOR REMOVAL

When wood is burned slowly, it produces tar and other organic vapors, which combine with expelled moisture to form creosote. The creosote vapors may condense on the inside of the chimney liner during slow-burning firing periods. As a result, creosote residue accumulates on the chimney liner. When ignited, this creosote makes an extremely hot fire.

* To properly inspect the liner system it is necessary to gain access to the top and/or bottom of the chimney. To inspect the liner from the bottom remove the connector pipe from the appliance and the chimney. Using a flash light and a mirror look in and up the liner to visually inspect for soot and creosote formation. Note: if the chimney has offsets you may not be able to see all the way to the top or to the bottom depending on your inspection location. In this case it will be necessary to inspect the liner from both the bottom and the top of the chimney.
* After inspection, if cleaning is required, use a plastic bristle brush the same size as the interior of the liner. Either push the brush up from the bottom or down from the top using the appropriate number of extension pole for the height of the chimney. When cleaning from the top remove the liner cap before inserting brush in the top of the liner.

8.) OPERATION

* For M-Flex liners, insulated with Premier Mix, used to vent a solid fuel burning appliance please note:
  Solid fuel burning stoves can be used immediately after the installation is complete. However the flue gas temperatures entering the liner should not exceed 500 degrees F. for a period of three weeks. A connector pipe flue gas thermometer will help monitor this procedure.

Fireplaces can also be used immediately after the installation is completed. A small to moderate fire should be maintained for a period of approximately three hours. After this time a normal fire can be established.

It is important that the operator not over fire the appliance during these initial periods.

PRODUCT INFORMATION: M-Flex 316L

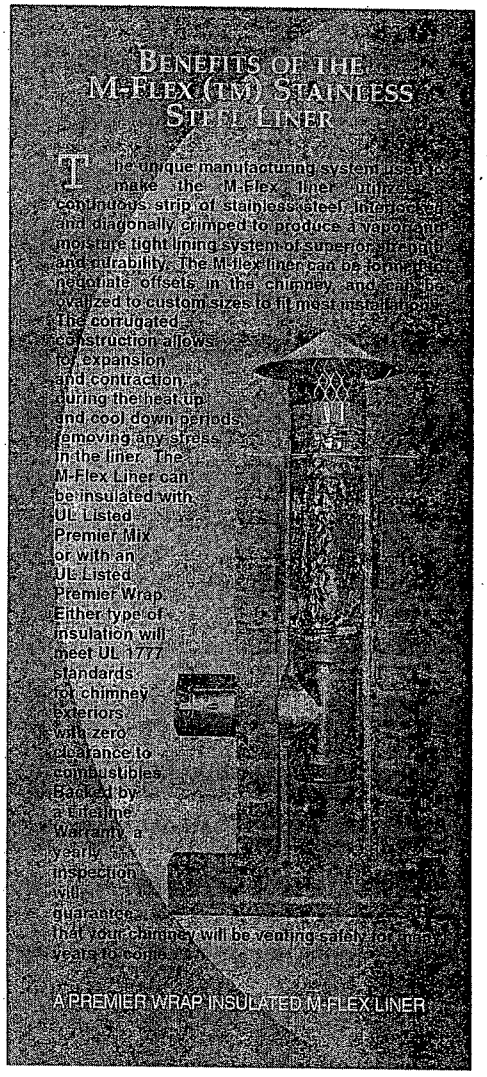
M-Flex 316L Stainless Steel Flexible Chimney liner is designed to reline existing chimneys or used as a liner in new construction. Manufactured in the highest quality, mill certified, 316L grade alloy MFlex Stainless Steel Flexible Chimney Liner has a high acid fighting capability. Listed by UL Laboratories to UL 1777 standard for zero clearance installation. M-Flex can be used to vent wood, wood pellet, coal, non-condensing gas and oil, making it the choice for venting all standard efficiency installations. M-Flex is available in 3" to 30" diameter to cover a wide range of requirements found in the field today.

The unique manufacturing systems used to make M-Flex utilizes a continuous strip of stainless steel, interlocked and diagonally crimped to produce a gas and water tight lining system of superior strength and durability. M-Flex can be bent to negotiated offsets in chimneys and can be ovalized to custom sizes to fit most any installation. The corrugated construction allows for expansion and contraction during the heat up and cool down periods, removing any stress on the system.

M-Flex can be insulated with either a Premier Mix or Thermal poured insulation or with a foil-faced ceramic wool blanket to meet UL 1777 standards for chimney exteriors with zero clearance to combustibles.

M-Flex can be shipped UPS in the following lengths 3"-50', 4"-44', 5"-38', 6"-32', 7"-26', 8"-20'. All other diameters and lengths exceeding those above must be shipped road freight.

M-Flex Stainless Steel Flexible Chimney Liner carries a Life Time Warrantee for all fuels, with appliance efficiencies at 83 percent or lower.



PRODUCT INFORMATION: M-FLEX 294C SS LINER

M-Flex 294C Stainless Steel Flexible Chimney Liner is designed to reline existing chimneys or used as a liner in new construction. Manufactured in the highest grade mill certified AL294C alloy M-Flex 294C has the greatest acid fighting ability to combat the acidic condensate produced by todays high efficiency boilers. Listed by Underwriters Laboratories M-flex 294C can be used to vent gas fired appliances with AFUE'S of 83% or greater. M-Flex 294C is available in diameters of 3" to 24" to cover the wide range of appliance requirements found in the field today.

The unique manufacturing system used to make M-Flex 294C utilizes a continuous strip of stainless steel, interlocked and diagonally crimped to produce a gas and water tight lining system of superior strength and durability. M-Flex 294C is extremely flexible and can negotiate offsets in chimneys with ease. It can also be ovalized to custom configurations to fit most any installation. The corrugated construction allows for expansion and contraction with in the liner removing any stress on the liner system.

For best performance of the appliance and the venting system M-Flex 294C can be insulated with either Premier Mix poured insulation or Premier Wrap ceramic wool blanket. Insulation should always be used on exterior chimneys.

M-Flex 294C carries a Life Time Warrantee for all installation venting condensing gas appliances.

Flex 294C can be shipped UPS in the following lengths: 3"-50', 4"-44', 5"-38', 6"-32', 7"-26', 8"-20'. All other diameters and lengths exceeding these above must be shipped road freight.