BLOCK 12052 LOT 20 QUALIFICATION CODE _____ ADDRESS (SITE) 202 Georges Rd PERMIT NO. 16-2260

CONSTRUCTION PERMIT APPLICATION

CIE-002736

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

I. IDENTIFICATION

1. Proposed Work Site at: 202 Georges Rd.
2. Name of Owner in Fee: Geisler, Sheryl
   Tel. (732) 977 7664 e-mail _____
   Address 202 Georges Rd (street) Brick (municipality) 08724 (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: _____ ( ) _____
   Address _____ Joe Hurley Inc.
   (732)660-1600 Fax (732)-660-1111
   _____ 1311 Allaire Avenue Ocean, NJ 07712
   License No. OR, if new h HIC#: 13VH00872000; Exp Date 12/31/16 Exp. Date _____
   FED EMP ID #: 22 323 7676
   Home Improvement Cont cable): _____
   Federal Emp. ID No. _____ FAX: ( ) _____
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. ( ) _____ FAX: ( ) _____
6. Responsible Person in Charge once Work has Begun _____
   Tel. (732) 660 1600 FAX: (732) 660 1111

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical		150.- 150.-	
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee		4.-	
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$	304.-	

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 AC
- ☐ New Building
- ☐ Addition
- ☐ Demolition
- ☐ Repair
- ☐ Alteration
- ☐ Renovation
- ☐ Reconstruction
- ☐ Asbestos Abat. -Subch. 8
- ☐ Lead Hazard Abatement
- ☐ Radon Remediation
- ☐ Annual Permit

RECEIVED JUN 9 2016

IIb. SUBCODES

(Check all that apply)

- ☐ Building
- ☑ Electrical
- ☑ 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	Resubmission Dates Rejection	Re-viewer
1	JM							
100.-				6/11/16	PT			
150.-				6-30-16	DM			
TOTAL COST 250.-								

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 8/9/2016
Control Number C-16-002736
Permit Number 16-2266
Permit Issue Date 7/7/2016
Certificate Number 16-2266

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 202 GEORGES RD. Brick Township, NJ Block: 1205.01 Lot: 20 Qual:

Owner in Fee: GEISLER, SHERYL L

Owner Address: 202 GEORGES RD BRICK NJ 08724

Telephone: (732) 977-7664

Contractor JOE HURLEY INC

Address 1311 ALLAIRE AVE OCEAN NJ 07712

Telephone: (732) 660-1600 Fax: (732) 660-1111

License Number or Builders Registration Number: 19HC00252600 13VH00872000 Federal Emp. Number: 223237676

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: AIR CONDITIONER

Certificate Comments:

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

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

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

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

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

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

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

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

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

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

Construction Official

Fee: $0.00
Check Number:
Collected By:

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

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

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

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

I further certify the following as required by the Uniform Construction Code, N.J.A.C. 5:23-2.15(a)5: All required State, county, and local prior approvals 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 5/31/16

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 _____ JOE HURLEY INC.
Address _____ 1311 Allaire Ave.
Ocean, NJ 07712
732-660-1600-FX 732-660-1111

Telephone (_____) _____

Signature _____

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received Control # 7/9/16

Date Issued Permit # 16-2266

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

Block 1205.01 Lot 20 Qualification Code

Work Site Location 202 Georges Rd.

Owner in Fee: Geisler, Sheryl

Tel. (732) 997-7664 e-mail

Address 202 Georges Rd (street) Brick (municipality) 08724 (zip code)

Contractor: Joe Hurley, llc. Tel. (732) 660-1600

Address 1311 Allaire Ave. Ocean, NJ 07712 e-mail

Contractor License No. 19HC00252600 Exp. Date 06/30/2018

Home Improvement Contractor Registration No. or Exemption Reason 13VH00872000 03/31/2017

Federal Emp. ID No. 223237676 FAX: (732) 660-1111

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 $ 1,950

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Plumbing Plans Approved

Date: Approved by:

Joint Plan Review Required:

[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 6-30-16

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date: 8-8-16

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				
Final			8-5-16	

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:

Print name here: Joe Hurley

[ ] Licensed Plumbing Contractor [X] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Replace condenser and coil

QTY.	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	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
1	Other Condensate	

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

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

CONSTRUCTION PERMIT

Date Issued 7/7/16
Control # C-16-002736
Permit # 16-2266

IDENTIFICATION Block: 1205.01 Lot: 20 Qualifier
Work Site Location: 202 GEORGES RD. Brick Township, NJ

Owner in Fee: GEISLER, SHERYL L
202 GEORGES RD BRICK NJ 08724
Telephone: (732) 977-7664

Contractor: JOE HURLEY INC
Address: 1311 ALLAIRE AVE OCEAN NJ 07712
Telephone: (732) 660-1600
Lic. No. or Bldrs. Reg. No. 13VH00872000 19HC00252600
Federal Employee. No. 223237676

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:
AIR CONDITIONER

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 $2,050

L Neuman Jr. — Construction Official
7/1/16 — Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$150
Plumbing	$150
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$4
CO Fee	
Other	$0
Total	$304
Check No.	4677
Cash	$0
Credit	$0
Collected By	BB

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

07/07/16 10:54AM 001558#1818
#406 SERV.006
#2266
ELECTRIC $150.00
PLUMBING $150.00
FEE $4.00
CHECK $304.00

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.

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 7/7/16
Control #
Date Issued
Permit # 16-2266

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

Block 1205.01 Lot 20 Qualification Code

Work Site Location 202 Georges Rd.

Owner in Fee: Geisler, Sheryl

Tel. (732) 977-7664 e-mail

Address 202 Georges Rd. (street) Brick (municipality) 08724 (zip code)

Contractor: Joe Hurley, Inc. Tel. (732) 660-1600

Address 1311 Allaire Ave. Ocean, NJ 07712 e-mail

Contractor License No. 19HC00252600 Exp. Date 06/30/2018

Home Improvement Contractor Registration No. or Exemption Reason 13VH00872000 03/31/2017

Federal Emp. ID No. 223237676 FAX: (732) 660-1111

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 100

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:

Print name here: Joe Hurley

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Reconnect 220V condenser

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	
0		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	25	KW Central A/C Unit Recovered	
		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	

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

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

[X] Electric Plans Approved SPECS
Date: 6/11/16 Approved by: PJC

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

SUBCODE APPROVAL for PERMIT
Date: 6/11/16
Approved by: P.C

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 8/5/16
Approved by: P.C

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			8/5/16	PJC
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

U.C.C. F120 (rev. 11/09)
Internet version

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

HEATING • COOLING • HUMIDIFIERS

JOE HURLEY INC.
Heating and Cooling

SHEETMETAL • AIR CLEANERS

July 5, 2016

Construction Department
Township of Brick
401 Chambersbridge Road
Brick, NJ 08723

To Whom It May Concern:

Enclosed please find a check for permits and a stamped self-addressed envelope for return of permits for the following properties:

Geisler
202 Georges Rd.
BLK-1205.01 & LOT-20

Thank you in advance.

JOE HURLEY, INC.

Joe Hurley,
President

ebm

1311 Allaire Avenue • Ocean, New Jersey 07712 • (732) 660-1600 • Fax (732) 660-1111
License # 13VH00872000 • Master HVACR Contractor # 19HC00252600

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

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

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

HAS REGISTERED

Joe Hurley, Inc.
Joe Hurley
P O Box 636
Oakhurst NJ 07755-0636

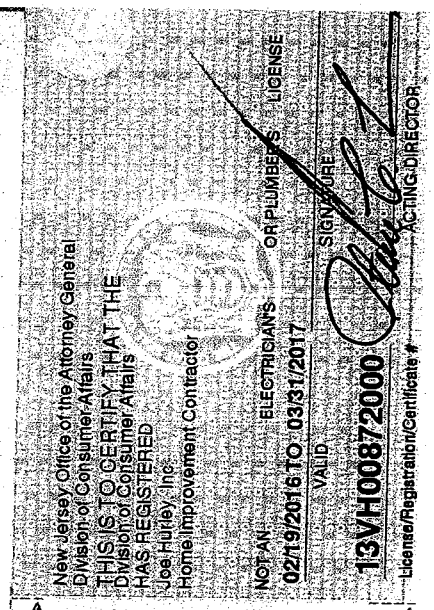
FOR PRACTICE IN NEW JERSEY AS A(N): Home Improvement Contractor

02/19/2016 TO 03/31/2017
VALID

13VH00872000
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

ACTING DIRECTOR



PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION/ CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:
Division of Consumer Affairs
P.O. Box 46016
Newark, NJ 07101

PLEASE DETACH HERE

BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY

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

THIS IS TO CERTIFY THAT THE

Board of Exam. of HVACR Contractors

HAS LICENSED

Joseph R. Hurley
1311 Allaire Ave
Ocean NJ 07712

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

05/04/2016 TO 06/30/2018
VALID

19HC00252600
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Exam. of HVACR Contractors
HAS LICENSED
Joseph R. Hurley
Master HVACR Contractor
05/04/2016 TO 06/30/2018
VALID
SIGNATURE
19HC00252600

PLEASE DETACH HERE

IF YOUR LICENSE/REGISTRATION CERTIFICATE ID CARD IS LOST PLEASE NOTIFY:

Board of Exam. of HVACR Contract
P.O. Box 47031
Newark, NJ 07101

PLEASE DETACH HERE

AIR CONDITIONERS

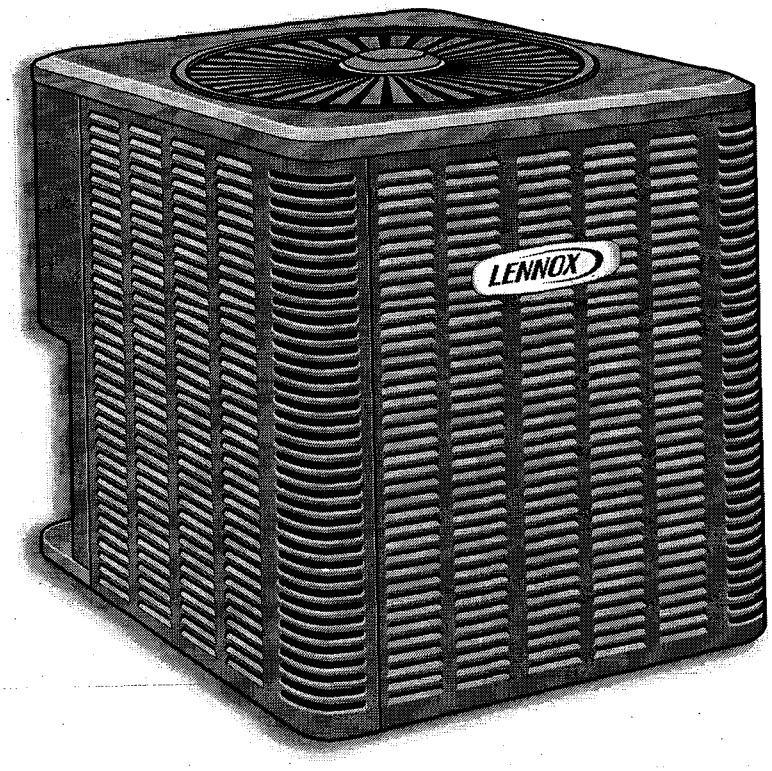
13ACX

MERIT® Series

R-410A

Bulletin No. 210739
March 2016
Supersedes February 2016

PRODUCT SPECIFICATIONS



MERIT® SERIES

SEER up to 15.50
1.5 to 5 Tons
Cooling Capacity - 17,500 to 59,000 Btuh

MODEL NUMBER IDENTIFICATION

13 AC X N 024 - 230 - 17

- **Nominal SEER**
- **Unit Type**
  AC = Air Conditioner
- **Refrigerant**
  X = R-410A
- **Regional Standards**
  N = North Region
- **Nominal Cooling Capacity**
  018 = 1.5 tons
  024 = 2 tons
  030 = 2.5 tons
  036 = 3 tons
  042 = 3.5 tons
  048 = 4 tons
  060 = 5 tons
- **Voltage**
  230 = 208/230V-1phase-60hz
- **Minor Revision Number**

SPECIFICATIONS

General Data	Model No.	Northern Region	13ACXN018	13ACXN024	13ACXN030	13ACXN036	13ACXN042	13ACXN048	13ACXN060
		Nominal Tonnage	1.5	2	2.5	3	3.5	4	5
Connections (sweat)		Liquid line o.d. - in.	3/8	3/8	3/8	3/8	3/8	3/8	3/8
		Suction line o.d. - in.	5/8	5/8	3/4	3/4	3/4	7/8	7/8
[1] Refrigerant (R-410A) furnished			3 lbs. 15 oz.	3 lbs. 15 oz.	5 lbs. 2 oz.	5 lbs. 4 oz.	6 lbs. 8 oz.	7 lbs. 12 oz.	9 lbs. 0 oz.
RFCIV Metering Orifice Size Furnished			0.051	0.057	0.065	0.072	0.076	0.082	0.090
Outdoor Coil	Net face area sq. ft.	Outer coil	11.33	11.33	13.22	13.22	16.33	18.67	16.33
		Inner coil	---	---	---	---	---	---	15.71
		Tube diameter - in.	5/16	5/16	5/16	5/16	5/16	5/16	5/16
		Number of rows	1	1	1	1	1	1	2
		Fins per inch	26	26	26	26	26	26	22
Outdoor Fan		Diameter - in.	18	18	18	18	22	22	22
		Number of blades	3	3	4	4	4	4	4
		Motor hp	1/10	1/10	1/5	1/5	1/4	1/4	1/4
		Cfm	2350	2350	2400	2400	3500	3670	3600
		Rpm	1010	1010	1090	1090	825	835	830
		Watts	165	165	185	185	300	295	285
Shipping Data - lbs. 1 package			138	138	144	151	188	195	218

ELECTRICAL DATA

		13ACXN018	13ACXN024	13ACXN030	13ACXN036	13ACXN042	13ACXN048	13ACXN060
Line voltage data - 60 hz - 1ph		208/230V	208/230V	208/230V	208/230V	208/230V	208/230V	208/230V
[2] Maximum overcurrent protection (amps)		20	25	30	35	45	50	60
[3] Minimum circuit ampacity		12.4	14.7	18.7	22.0	28.1	31.9	34.6
Compressor	Rated load amps	9.4	11.2	14.1	16.7	21.2	24.2	26.3
	Locked rotor amps	56.6	60.8	73	70	90	100	125
	Power factor	0.98	0.98	0.98	0.99	0.99	0.99	0.99
Condenser Fan Motor	Full load amps	0.7	0.7	1.1	1.1	1.7	1.7	1.7
	Locked rotor amps	1.3	1.3	2.0	2.0	3.2	3.2	3.2

OPTIONAL ACCESSORIES - ORDER SEPARATELY

Compressor Crankcase Heater		93M04	•	•	•	•			
		93M05					•	•	•
Compressor Hard Start Kit		10J42	•						
		88M91		•	•	•	•	•	•
Compressor Low Ambient Cut-Off Switch		45F08	•	•	•	•	•	•	•
Compressor Sound Cover		27W55	•	•	•	•			
		27W56					•	•	•
Compressor Time-Off Control		47J27	•	•	•	•	•	•	•
Freezestat	3/8 in. tubing	93G35	•	•	•	•	•	•	•
	5/8 in. tubing	50A93	•	•	•	•	•	•	•
Indoor Blower Off Delay Relay		58M81	•	•	•	•	•	•	•
Loss of Charge Switch Kit		84M23	•	•	•	•	•	•	•
[4] Low Ambient Kit (Fan Cycling)		34M72	•	•	•	•	•	•	•
Mounting Base		69J06	•	•	•	•			
		69J07					•	•	•
Refrigerant Line Sets	L15-26-20, L15-26-25, L15-26-35, L15-26-50		•	•					
	L15-41-20, L15-41-30, L15-41-40, L15-41-50				•	•	•		
	L15-65-30, L15-65-40, L15-65-50							•	•
Unit Stand-Off Kit		94J45	•	•	•	•	•	•	•

NOTE - Extremes of operating range are plus 10% and minus 5% of line voltage.

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

[2] HACR type circuit breaker or fuse.

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

[4] Crankcase Heater and Freezestat are recommended with Low Ambient Kit.