BLOCK 1205.03 LOT 10 QUALIFICATION CODE _____ ADDRESS (SITE) 216 Veronica Dr PERMIT NO. 13-2223

CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII C-13-002525

I. IDENTIFICATION

1. Proposed Work Site at: 216 Veronica Dr. Brick 08724
2. Name of Owner in Fee: Metelski
   Tel. (732) 458-5893 e-mail N/A
   Address same as above. (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: AJ Perri Tel. (732) 982-8700
   Address 1138 Pine Brook Road e-mail _____
   Tinton Falls, NJ 07724
   License No. OR, if new home, Builder Reg. No. 13VH00346300 Exp. Date _____
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. [redacted] FAX: (732) 982-8715
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. ( ) _____ FAX: ( ) _____
6. Responsible Person in Charge once Work has Begun Greg Johnston
   Tel. (732) 720-2116 (Kristy) FAX: ( ) _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$	50-	
2. Electrical		50-	
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee		13-	
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$	113-	

VI. BUILDING/SITE CHARACTERISTICS (office use only)

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

IIa. PROPOSED WORK

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

IIb. SUBCODES (Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building		APR 26 2013							
☑ Electrical	2100				4-30-13	JS			
☑ Plumbing	5040			05.01.13		MS 5-2-13			JJ
☐ Fire Protection									
☐ Elevator									
TOTAL COST	1200								

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
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 07/10/2013
Control Number C-13-002525
Permit Number 13-2223
Permit Issue Date 05/24/2013
Certificate Number 13-2223

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 216 VERONICA DR Brick Township, NJ Block: 1205.03 Lot: 10 Qual:

Owner in Fee: METELSKI, FRANK & ADELE

Owner Address: 216 VERONICA DR BRICK NJ 08724

Telephone: (732) 458-5893

Contractor AJ 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: 13VH00346300 13296B 12323 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

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: 07/10/2013 U.C.C. F260 (rev. 08/05)

5/3/13 Spoke to Contractor (mo)

CONSTRUCTION PERMIT

Date Issued 5/21/13
Control # C-13-002525
Permit # 13-2223

IDENTIFICATION Block: 1205.03 Lot: 10 Qualifier
Work Site Location: 216 VERONICA DR Brick Township, NJ
Owner in Fee METELSKI, FRANK & ADELE
216 VERONICA DR BRICK NJ 08724
Telephone: (732) 458-5893

Contractor AJ PERRI INC
Address 1138 PINE BROOK ROAD TINTON FALLS NJ 07724
Telephone: (732) 982-8700
Lic. No. or Bldrs. Reg. No [redacted]
Federal Employee. No.

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

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 $7,200

Daniel F Newman Jr
Construction Official

5/21/13
Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$50
Plumbing	$50
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$13
CO Fee	
Other	$0
Total	$113
Check No.	11544
Cash	$0
Credit	$0
Collected By	

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.

ELECTRIC $50.00
PLUMBING $50.00
DCA $13.00
CHECK $113.00

☑ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☑ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

☐ A complete copy of released plans must be kept on the job site.

If you do not understand any of this information, please ask.

135699

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received Control # 5/24/13

Date Issued Permit # 13-2223

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

Block 1206.03 Lot 10 Qualification Code

Work Site Location 216 Veronica Drive
BRICK 08724

Owner in Fee: Metelski

Tel. (732) 458-5893 e-mail N/A

Address same as ABOVE
street municipality zip code

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

Address 9 Ellis Court e-mail n/a
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 $ 2160

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: 4-30-13
Approved by: DJ

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 6.25.13
Approved by: D. Dunne (Insp)

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			6-25-13	DD
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.

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

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
1		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	3.8	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	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

AJ 019A 4 10

135699

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 5/24/13

Date Issued / Permit # 13-2223

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

Block 1205.03 Lot 10 Qualification Code _____

Work Site Location 216 Veronica Drive
BRICK NJ 08724

Owner in Fee: Metelski

Tel. 732 458-5893 e-mail n/a

Address same as above

Contractor: MICHAEL J. PERRI T/A AJ PERRI, INC. (street / municipality / zip code) Tel. (732) 689-6363

Address 9 JOHNSON STREET
MONMOUTH BEACH, NJ 07750 e-mail _____

Contractor License No. 12566 Exp. Date _____

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

Federal Emp. ID No. _____ FAX: (732) 982-8719

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 $ 5040

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: 5-2-13
Approved by: [signature]

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [✓] CA
Date: 6-27-13
Approved by: [signature]

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			06-25-13	PA

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 Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Replace A/C Unit

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 A/C 2½T	
	Other	

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

fax 5/1/13 (732)992-8715

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1030

Subcode Official Review

resubmit 5/1/13

Date: Wednesday, May 01, 2013

To: METELSKI, FRANK & ADELE
216 VERONICA DR
BRICK, NJ 08724

RE: Plumbing Subcode
Block: 1205.03 Lot: 10 Qual:
216 VERONICA DR
Permit Number: Control Number: C-13-002525
Last Submit Date: Tuesday, April 30, 2013

Dear METELSKI, FRANK & ADELE,

Your request is hereby denied based upon the following infractions.
1- submit the btu's of the existing a/c and the replacement

Sincerely,

_____

Paul Auth , Subcode Official

CC:

FOR REPLACEMENT FURNACE

OLD BTU — INPUT_____ OUTPUT_____

NEW BTU — INPUT_____ OUTPUT_____

A/C REPLACEMENT

OLD UNIT 24,000 BTU

NEW UNIT 30,000 BTU

AND/OR

HEAT LOSS/HEAT GAIN

***IF YOU DON'T HAVE OLD BTU'S AND NEW BTU'S OF UNIT'S, YOU WILL HAVE TO SUBMIT A HEAT LOSS/HEAT GAIN.

***IF THE NEW UNIT BTU IS LESS THAN THE OLD UNIT BTU YOU WILL HAVE TO SUBMIT A HEAT LOSS/HEAT GAIN.

**********WE ALSO WILL NEED **********

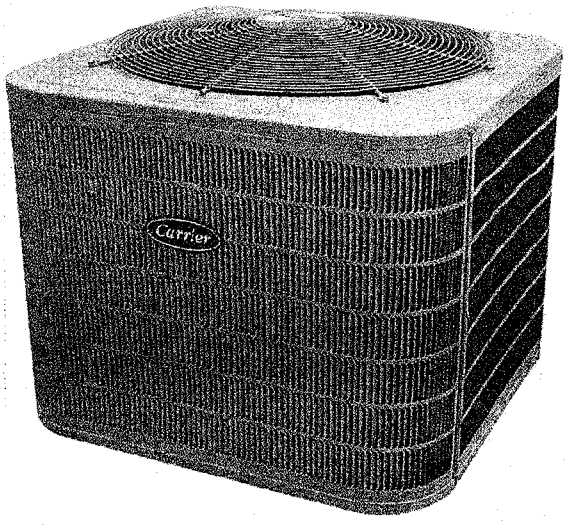
******COPY OF THE BROCHURE/SPECS OF THE NEW FURNACE (NOT THE INSTALLATION GUIDE) AND /OR AIR CONDITION UNIT.

******CHIMNEY CERTIFICATION (CANNOT BE CERTIFICATION BY HOMEOWNER)

24ACC6
Performance™ 16 Air Conditioner with Puron® Refrigerant 1–1/2 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 24ACC 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.

This product has been designed and manufactured to meet Energy Star® criteria for energy efficiency when matched with appropriate coil components. 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

- 14 - 16.5 SEER / 11.5- 13.5 EER
- Microtube Technology™ refrigeration system
- Indoor air quality accessories available

Sound

- Sound level as low as 72 dBA
- Compressor sound blanket standard

Comfort

- System supports Edge® Thermidistat™ or standard thermostat controls

Reliability

- Puron® refrigerant - environmentally sound, won't deplete the ozone layer and low lifetime servce cost.
- Scroll compressor
- Internal pressure relief valve
- Internal thermal overload
- Filter drier
- High and low pressure switches
- Balanced refrigeration system for maximum reliability

Durability

WeatherArmor™ protection package:

- Solid, durable sheet metal construction
- Louvered coil guard
- Baked-on, complete outer coverage, powder paint

Applications

- Long-line - up to 250 feet (76.20 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.)
- Low ambient (down to -20°F/-28.9°C)) with accessory kit

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**	**C**	**C**	**6**	**3**	**6**	**A**	**0**	**0**	**3**	**0**
Product Series		Product Family	Tier	Major Series	SEER	Cooling Capacity		Grille Variations	Open	Open	Voltage	Series
24=AC		A=RES AC	C=Performance	C=Puron	6=16 SEER			A = Standard	0=Not Defined	0=Not Defined	3=208/230–1	0 = Original Series

Puron™
the environmentally sound refrigerant

AHRI CERTIFIED
www.ahridirectory.org

Use of the AHRI Certified TM Mark indicates a manufacturer's participation in the program For verification of certification for individual products, go to www.ahridirectory.org.

Certified System™
ISO 9001
QMI-SAI Global

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

Feature	18	24	30	36	42	48	60
Puron Refrigerant	X	X	X	X	X	X	X
Maximum SEER *	16.0	16.0	16.5	16.5	16.0	16.0	16.0
Scroll Compressor	X	X	X	X	X	X	X
Field Installed Filter Drier	X	X	X	X	X	X	X
Front Seating Service Valves	X	X	X	X	X	X	X
Internal Pressure Relief Valve	X	X	X	X	X	X	X
Internal Thermal Overload	X	X	X	X	X	X	X
Long Line capability	X	X	X	X	X	X	X
Low Ambient capability with Kit	X	X	X	X	X	X	X
High Pressure Switch	X	X	X	X	X	X	X
Low Pressure Switch	X	X	X	X	X	X	X
Compressor Sound Blanket	X	X	X	X	X	X	X
Louvered Coil Guard	X	X	X	X	X	X	X

* With approved combinations
X = Standard

PHYSICAL DATA

UNIT SIZE – VOLTAGE, SERIES	18–30	24–30	30–30	36–30	42–30	48–30	60–30
Operating Weight lb (kg)	136 (61.7)	163 (73.9)	167 (75.7)	180 (81.6)	234 (106.1)	248 (112.5)	337 (152.9)
Shipping Weight lb (kg)	163 (73.9)	198 (89.8)	204 (92.5)	219 (99.3)	281 (127.5)	291 (132.0)	372 (188.7)
Compressor Type	Scroll						
REFRIGERANT							
Control	Puron□ (R–410A)						
Charge lb (kg)	TXV (Puron□ Hard Shutoff)						
COND FAN	4.60 (2.09)	6.00 (2.72)	6.81 (3.09)	7.00 (3.18)	8.62 (3.91)	10.50 (4.76)	14.50 (6.58)
Air Discharge	Propeller Type, Direct Drive						
Air Qty (CFM)	Vertical						
Motor HP	1881	2614	2614	3223	3810	4046	4046
Motor RPM	1/12	1/10	1/10	1/12	1/5	1/4	1/4
COND COIL	1100	800	800	800	800	800	800
Face Area (Sq ft)	11.50	15.10	17.20	17.60	25.15	20.10	30.15
Fins per In.	25	25	25	25	25	20	20
Rows	1	1	1	1	1	2	2
Circuits	3	4	4	4	6	7	8
VALVE CONNECT. (In. ID)							
Vapor	3/4	3/4	3/4	7/8	7/8	7/8	7/8
Liquid	3/8	3/8	3/8	3/8	3/8	3/8	3/8
REFRIGERANT TUBES (In. OD)							
Rated Vapor*	3/4			7/8			1 1/8
Max Liquid Line	3/8						

* Units are rated with 25 ft (7.6 m) of lineset length. See Vapor Line Sizing and Cooling Capacity Loss table when using other sizes and lengths of lineset.
Note: See unit Installation Instruction for proper installation.
† See *Liquid Line Sizing For Cooling Only Systems with Puron Refrigerant* tables.

REFRIGERANT PIPING LENGTH LIMITATIONS

Liquid Line Sizing and Maximum Total Equivalent Lengths† for Cooling Only Systems with Puron® Refrigerant:

The maximum allowable length of a residential split system depends on the liquid line diameter and vertical separation between indoor and outdoor units.

See Table below for liquid line sizing and maximum lengths :

Maximum Total Equivalent Length
Outdoor Unit BELOW Indoor Unit

Size	Liquid Line Connection	Liquid Line Diam. w/ TXV	AC with Puron Refrigerant Maximum Total Equivalent Length†: Outdoor unit BELOW Indoor Vertical Separation ft (m)								
			0–5 (0–1.5)	6–10 (1.8–3.0)	11–20 (3.4–6.1)	21–30 (6.4–9.1)	31–40 (9.4–12.2)	41–50 (12.5–15.2)	51–60 (15.5–18.3)	61–70 (18.6–21.3)	71–80 (21.6–24.4)
18000 AC with Puron	3/8	1/4	150	150	125	100	100	75	--	--	--
		5/16	250*	250*	250*	250*	250*	250*	250*	225*	150
		3/8	250*	250*	250*	250*	250*	250*	250*	250*	250*
24000 AC with Puron	3/8	1/4	75	75	75	50	50	--	--	--	--
		5/16	250*	250*	250*	250*	250*	225*	175	125	100
		3/8	250*	250*	250*	250*	250*	250*	250*	250*	250*
30000 AC with Puron	3/8	1/4	30	--	--	--	--	--	--	--	--
		5/16	175	225*	200	175	125	100	75	--	--
		3/8	250*	250*	250*	250*	250*	250*	250*	250*	250*
36000 AC with Puron	3/8	5/16	175	150	150	100	100	100	75	--	--
		3/8	250*	250*	250*	250*	250*	250*	250*	250*	250*
42000 AC with Puron	3/8	5/16	125	100	100	75	75	50	--	--	--
		3/8	250*	250*	250*	250*	250*	250*	250*	250*	150
48000 AC with Puron	3/8	3/8	250*	250*	250*	250*	250*	250*	230	160	--
60000 AC with Puron	3/8	3/8	250*	250*	250*	225*	190	150	110	--	--

* Maximum actual length not to exceed 200 ft (61 m)

† Total equivalent length accounts for losses due to elbows or fitting. See the Long Line Guideline for details.

-- = outside acceptable range

Maximum Total Equivalent Length
Outdoor Unit ABOVE Indoor Unit

Size	Liquid Line Connection	Liquid Line Diam. w/ TXV	AC with Puron Refrigerant Maximum Total Equivalent Length†: Outdoor unit ABOVE Indoor Vertical Separation ft (m)							
			25 (7.6)	26–50 (7.9–15.2)	51–75 (15.5–22.9)	76–100 (23.2–30.5)	101–125 (30.8–38.1)	126–150 (38.4–45.7)	151–175 (46.0–53.3)	176–200 (53.6–61.0)
18000 AC with Puron	3/8	1/4	175	250*	250*	250*	250*	250*	250*	250*
		5/16	250*	250*	250*	250*	250*	250*	250*	250*
		3/8	250*	250*	250*	250*	250*	250*	250*	250*
24000 AC with Puron	3/8	1/4	100	125	175	200	225*	250*	250*	250*
		5/16	250*	250*	250*	250*	250*	250*	250*	250*
		3/8	250*	250*	250*	250*	250*	250*	250*	250*
30000 AC with Puron	3/8	1/4	30	--	--	--	--	--	--	--
		5/16	250*	250*	250*	250*	250*	250*	250*	250*
		3/8	250*	250*	250*	250*	250*	250*	250*	250*
36000 AC with Puron	3/8	5/16	225*	250*	250*	250*	250*	250*	250*	250*
		3/8	250*	250*	250*	250*	250*	250*	250*	250*
42000 AC with Puron	3/8	5/16	175	200	250*	250*	250*	250*	250*	250*
		3/8	250*	250*	250*	250*	250*	250*	250*	250*
48000 AC with Puron	3/8	3/8	250*	250*	250*	250*	250*	250*	250*	250*
60000 AC with Puron	3/8	3/8	250*	250*	250*	250*	250*	250*	250*	250*

* Maximum actual length not to exceed 200 ft (61 m)

† Total equivalent length accounts for losses due to elbows or fitting. See the Long Line Guideline for details.

-- = outside acceptable range

ELECTRICAL DATA

UNIT SIZE	V/PH	OPER VOLTS*		COMPR		FAN	MCA	MIN WIRE SIZE† 60° C	MIN WIRE SIZE† 75° C	MAX LENGTH ft. (m)‡ 60° C	MAX LENGTH ft. (m)‡ 75° C	MAX FUSE** or CKT BRK AMPS
		MAX	MIN	LRA	RLA	FLA						
18–30	208/230/1–60	253	197	48.0	9.0	0.50	11.8	14	14	67 (20.4)	64 (19.5)	20
24–30				58.3	13.5	0.70	17.6	14	14	46 (14.0)	43 (13..1)	25
30–30				64.0	12.8	0.70	16.7	14	14	44 (13.4)	41 (12.5)	25
36–30				77.0	14.1	0.50	18.1	12	12	57 (17.4)	54 (16.5)	30
42–30				112.0	17.9	1.20	23.6	10	10	85 (25.9)	81 (24.7)	40
48–30				109.0	19.9	1.20	26.1	10	10	70 (21.3)	67 (20.4)	40
60–30				135.0	21.4	1.20	28.0	8	10	91 (27.7)	56 (17.1)	40

* 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 2010 requirements of ASHRAE Standards 90.1

A-WEIGHTED SOUND POWER LEVEL (dBA)

Unit Size – Voltage, Series	Standard Rating (dBA)	TYPICAL OCTAVE BAND SPECTRUM (dBA without tone adjustment)						
		125	250	500	1000	2000	4000	8000
18–30	73	49.5	58.5	64.5	69.0	63.0	59.5	52.4
24–30	74	54.5	62.0	67.0	71.5	66.0	62.0	53.0
30–30	74	56.0	62.5	66.0	68.5	64.5	61.0	53.5
36–30	72	52.0	61.0	64.0	66.0	61.0	58.5	51.5
42–30	74	56.5	61.5	65.0	66.5	63.5	61.0	56.5
48–30	73	58.0	61.0	65.0	66.0	62.0	58.0	51.0
60–30	74	56.5	62.5	66.5	68.0	63.0	59.5	51.5

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

CHARGING SUBCOOLING (TXV-TYPE EXPANSION DEVICE)

UNIT SIZE–VOLTAGE, SERIES	REQUIRED SUBCOOLING °F (°C)
18–30	10 (5.6)
24–30	10 (5.6)
30–30	10 (5.6)
36–30	10 (5.6)
42–30	9 (5.0)
48–30	10 (5.6)
60–30	9 (5.0)

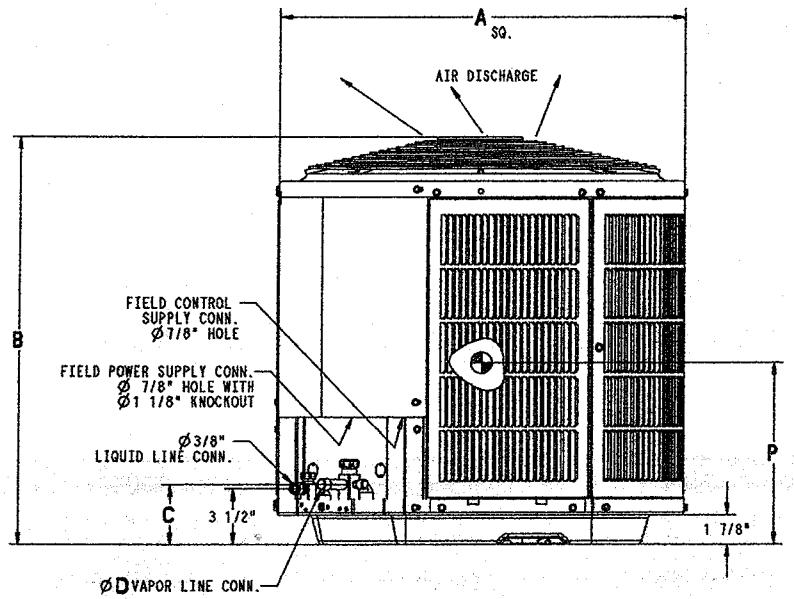
DIMENSIONS - ENGLISH

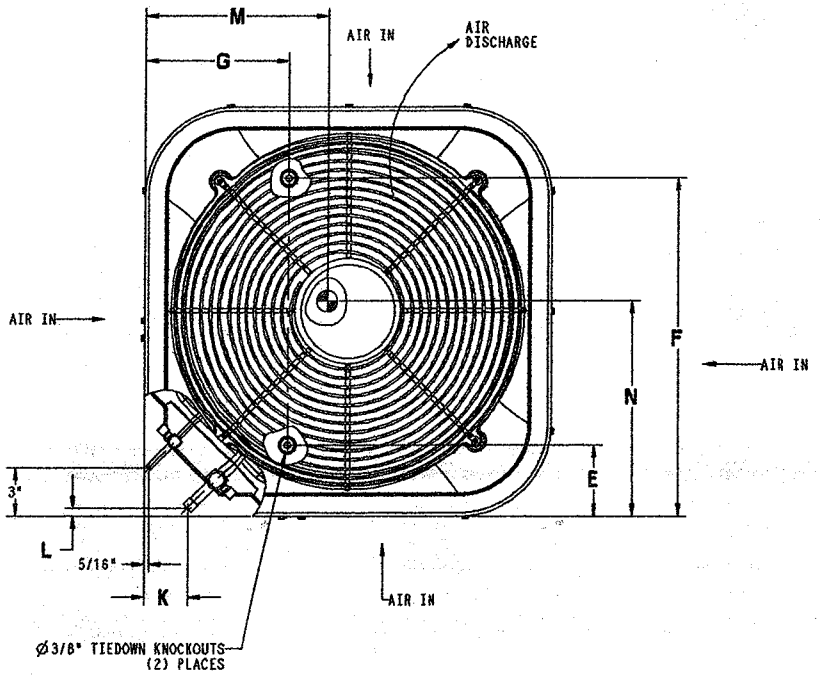
UNIT	SERIES	ELECTRICAL CHARACTERISTICS				A	B	C	D	E	F	G	K	L	M	N	P	OPERATING WEIGHT (lbs)	SHIPPING WEIGHT (lbs)	SHIPPING DIMENSIONS (L x W x H)
24ACC618	0	X	0	0	0	25 3/4"	28 11/16"	3 3/4"	3/4"	4 7/16"	21 1/4"	7 13/16"	2 13/16"	1/2"	13 1/4"	13 3/4"	12 3/4"	136	163	26 7/8" X 30 1/16" X 32 9/16"
24ACC624	0	X	0	0	0	31 3/16"	28 5/16"	3 3/4"	3/4"	6 9/16"	24 11/16"	9 1/8"	2 13/16"	1/2"	15 5/8"	15 1/2"	14"	163	198	32 3/8" X 35 1/2" X 32 9/16"
24ACC630	0	X	0	0	0	31 3/16"	32 5/16"	3 3/4"	3/4"	6 9/16"	24 11/16"	9 1/8"	2 13/16"	1/2"	16 1/2"	15"	14 3/4"	167	204	32 3/8" X 35 1/2" X 35 15/16"
24ACC636	0	X	0	0	0	35"	28 5/16"	3 7/8"	7/8"	6 9/16"	28 7/16"	9 1/8"	2 15/16"	5/8"	18 1/4"	16 7/8"	14"	180	219	36 1/8" X 39 5/16" X 32 9/16"
24ACC642	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"	16"	17 1/2"	234	281	36 1/8" X 39 5/16" X 42 3/4"
24ACC648	0	X	0	0	0	35"	32 5/16"	3 7/8"	7/8"	6 9/16"	28 7/16"	9 1/8"	2 15/16"	5/8"	17"	17 1/2"	14"	248	291	36 1/8" X 39 5/16" X 35 15/16"
24ACC660	0	X	0	0	0	35"	45 15/16"	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"	337	372	36 1/8" X 39 5/16" X 49 9/16"
		208-230-1-60	230-1-60	208/230-3-60	460-3-60															

X = YES
O = NO

NOTES:

1. ALLOW 30" CLEARANCE TO SERVICE SIDE OF UNIT, 48" ABOVE UNIT, 6" ON ONE SIDE, 12" ON REMAINING SIDE, AND 24" BETWEEN UNITS FOR PROPER AIRFLOW.
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 NOTED.





UNIT SIZE	MINIMUM MOUNTING PAD DIMENSIONS
18	26" X 26"
24,30	31 1/2" X 31 1/2"
36 THRU 60	35" X 35"

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 _____

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**

Address **1138 Pine Brook Rpad**

Tinton Falls, NJ 07724

Telephone (**732**) **720-2116 (Kristy)**

Signature _____

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