

BLOCK 1192.28 LOT 5 QUALIFICATION CODE _____ ADDRESS (SITE) 12 KEATS Ld

PERMIT NO. 09-1150

REC'D MAY 15 2009



CONSTRUCTION PERMIT APPLICATION

09-001593

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

I. IDENTIFICATION

1. Proposed Work Site at: 12 KEATS Rd

2. Name of Owner: SIDOR

Tel. [REDACTED] -mail _____

Address same street _____ municipality _____ zip code _____

3. Ownership in Fee: Public _____ Private ☒

4. Principal Contractor: B+S Electric Inc Tel. (732) 920-0120

Address 523 Eisenhower Dr (PO Box 744) Pleasant NJ e-mail _____

License No. OR, if new home, Builder Reg. No. 2742 Exp. Date 3/12

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

Federal Emp. ID No. 300020750 FAX: 732 920-0120

5. Architect or Engineer _____ Contact _____

Address _____ e-mail _____

Tel. () _____ FAX: () _____

6. Responsible Person in Charge once Work has Begun Joseph Battaglia

Tel. 732 920-0120 FAX: (732) 849-3335

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>10</u>	☒	
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	\$		
8. Subtotal	\$		
9. State Permit Surcharge Fee	\$		
10. Subtotal	\$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>41</u>		

VI. BUILDING/SITE CHARACTERISTICS

1. Number of Stories	_____	(office use only)
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	_____	

IIa. PROPOSED WORK

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

IIb. SUBCODES

(Check all that apply)

- ☐ Building
- ☒ Electrical
- ☐ Plumbing
- ☐ Fire Protection
- ☐ Elevator

FOR OFFICE USE ONLY (Optional)

Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
<u>135.</u>				<u>5-19-9</u>	<u>LS</u>			

TOTAL COSTS

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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL (primary use)

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 (primary use)

1. State Specific Use: _____
2. Use Group: _____
3. Change in Use Group, Indicate Former: _____

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

Called 5/20/09

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.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

Joseph P. [Signature]

Date

5-13-09

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

B+ Electric Inc.

Address

10 Park Ave

Princeton NJ 08742

Telephone

732-970-0120

Signature

Joseph P. [Signature]

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

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Zoning Officer									
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Department of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Department of Environmental Protection									
☐ Utility Dig No.									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition	Name of Code & Edition
Building _____	Energy _____
Electrical _____	Barrier Free _____
Plumbing _____	Flood Hazard _____
Fire Protection _____	As Built Elevation Cert. _____
Mechanical _____	Other _____

X. CERTIFICATES ISSUED (office use only)

	DATE ISSUED	DATE EXPIRED	DATE REISSUED	DATE EXPIRED
☐ Temporary Certificate of Occupancy	No. _____	_____	_____	_____
☐ Temporary Certificate of Compliance	No. _____	_____	_____	_____
☐ Continued Certificate of Occupancy	No. _____	_____	_____	_____
☐ Certificate of Compliance	No. _____	_____	_____	_____
☐ Certificate of Occupancy	No. _____	_____	_____	_____
☐ Certificate of Approval	No. _____	_____	_____	_____
☐ Lead Abatement Clearance Certificate	No. _____	_____	_____	_____

Constituent Contact Report

[illegible]

☐ Zoning Application deemed complete

Initialed: _____ Date: _____

☐ Zoning Application approved

Initialled: _____ Date: _____

☐ Zoning permit updates:



CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

09-1150
C-09-001593
5/22/09

IDENTIFICATION Block: 1192.28 Lot: 5 Qualifier
Work Site Location: 12 KEATS RD. Brick Township, NJ Contractor: B & J ELECTRIC
Owner in Fee: SIPOS, ZSIGMOND & ELIZABETH Address: PO BOX 764 523 Eisenhower Drive PT. PLEASANT NJ
12 KEATS ROAD BRICK NJ 08724 Telephone: (732) 920-0120
Telephone: [REDACTED] Lic. No. or Bldrs. Reg. No. 2742
Federal Employee No. 30-0020750

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:

ELECTRICAL ALTERATIONS BOX ONLY & CORD FOR DRYER/RECEPTACLE

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 \$135

Construction Official

Date

5-19-09

U.C.C. F170
equiv (rev 8/03)

1 WHITE - INSPECTOR

2 CANARY - OFFICE

3 PINK - TAX ASSESSOR

4 GOLD - APPLICANT

PAYMENTS (Office Use Only)

Building	\$0
Electrical	\$40
Plumbing	\$0
Fire Protection	\$0
Elevator Devices	\$0
Other	\$0.00
DCA Training Fee	\$1
CO Fee	
Other	\$0
Total	\$41
Check No.	
Cash	\$0
Credit	\$0
Collected By	

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

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

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

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

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

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

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

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

05/22/09 11:37AM 0015581071
NJAC 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.
#1150
CHECK \$40.00
\$1.00
\$41.00



Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 08/10/2009
Control Number C-09-001593
Permit Number 09-1150
Permit Issue Date 05/22/2009
Certificate Number 09-1150

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 12 KEATS RD. Brick Township, NJ Block: 1192.28 Lot: 5 Qual: _____
Owner in Fee: SIPOS, ZSIGMOND & ELIZABETH
Owner Address: 12 KEATS ROAD BRICK NJ 08724
Telephone: _____
Contractor B & J ELECTRIC
Address PO BOX 764 523 Eisenhower Drive PT. PLEASANT NJ 08742-
Telephone: (732) 920-0120 Fax: _____
License Number or Builders Registration Number: 2742 Federal Emp. Number: 30-0020750

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: ELECTRICAL ALTERATIONS BOX ONLY & CORD FOR DRYER/RECEPTACLE

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 NJACS: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: _____



ELECTRICAL
SUBCODE
TECHNICAL SECTION

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

Block 1192028 Lot 5 Qualification Code _____
Work Site Location 12 Kats Rd
Brick

Owner in Fee _____ e-mail _____
Address 2012 street _____ municipality _____ zip code _____
Tel. _____ Tel. (732) _____ 920-0120.

Contractor: B&J ELECTRIC, INC.
Address P.O. BOX 764 (523 EISENHOWER DR.)
POINT PLEASANT, NEW JERSEY 08742
Contractor License No. 2742 Exp. Date 3/12
Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
Federal Emp. ID No. 300020750 FAX: (732) 899-3525

B. ELECTRICAL CHARACTERISTICS

Use Group: Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [] Other _____
Building Occupied as _____ Utility Co. _____
Estimated Cost of Electrical Work \$ 135.00

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Type:	Failure	Approval	Initial	
<u>9/18/99</u> No Plans Required <u>5-18-99</u> <u>AS</u>	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				

Approved by: _____ Date: 6-9-99 AS
SUBCODE APPROVAL
[] CO [] CCO [] CA
Approved by: _____ Date: 6-8-99 DD

1. White-Inspector Copy
2. Canary-Applicant Copy
3. Pink-Office Copy
4. White Tag-Office Copy

06/08



Date Received
Date Issued
Control #
Permit #

69-1150
5/22/09

C. CERTIFICATION IN LIEU OF OATH

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

Applicant Signature/Contractor's Seal and Signature
[X] Licensed Elec. Contractor [] Cert'd Landscape Irrigation Contr'r [] Exempt Applicant

D. TECHNICAL SITE DATA

QTY. SIZE ITEMS
Lighting Fixture
Receptacles
Switches
Detectors
Light Poles
Motors—Fract. HP
Emergency & Exit Lights
Communications Points
Alarm Devices/FA.C. Panel

TOTAL NUMBERS
Pool Permit/with UW Lights
Storable Pool/Spa/Hot Tub
KW Elec. Rang/Receptacle
KW Oven/Surface Unit
KW Elec. Water Heater
KW Elec. Dryer/Receptacle
KW Dishwasher
HP Garbage Disposal
KW Central A/C Unit
HP/KW Space Heater/Air Handler
KW Baseboard Heat
HP Motors 1/+ HP
KW Transformer/Generator
AMP Service
AMP Subpanels
AMP Motor Control Center
KW Elec. Sign/Outline Light

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

UCC/F-120
Professional Printing
(856) 468-7933

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



ELECTRICAL SUBCODE TECHNICAL SECTION

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

Block 1192028 Lot 5 Qualification Code _____
Work Site Location 12 Kats Rd

Owner in Fee: Sims e-mail _____
Te _____

Address 1192028 street _____ municipality _____ zip code _____

Contractor: B&J ELECTRIC, INC. Tel. (732) 920-0120
Address P.O. BOX 764 (523 EISENHOWER DR.)

Contractor License No. 2742 Exp. Date 3/12
Home Improvement Contractor Registration No. or Exemption Reason (if applicable):

Federal Emp. ID No. 300029750 FAX: (732) 899-3525

B. ELECTRICAL CHARACTERISTICS

Use Group: Present _____ Proposed _____
[] Pole/Pad # _____ [] Temporary [] Other _____

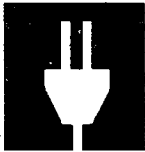
Building Occupied as _____ Utility Co. _____

Estimated Cost of Electrical Work \$ 135.00

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Type:	Failure	Approval	Initial	
No Plans Required 5-18-9 742	Rough				
	Barrier-Free				
	Trench				
	Temp. Serv.				
Joint Plan Review Required	Building [] Plumbing				
	Fire [] Elevator				
	Elec. Plans Approved				
	Date:				
Approved by:					
SUBCODE APPROVAL					
[] CO [] CCO [] CA					
Date:					
Approved by:					
Date of Grounding and Bonding					
Certification					

1. White-Inspector Copy
2. Canary-Applicant Copy
3. Pink-Office Copy
4. White Tag-Office Copy

06/08



Date Received
Date Issued
Control #
Permit #

69-1150
5/22/09

C. CERTIFICATION IN LIEU OF OATH

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

Applicant Signature/Contractor's Seal and Signature _____

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

D. TECHNICAL SITE DATA

QTY. SIZE ITEMS

Lighting Fixture _____
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. Rang./Receptacle _____

KW Oven/Surface Unit _____

KW Elec. Water Heater _____

KW Elec. Dryer/Receptacle _____

KW Dishwasher _____

HP Garbage Disposal _____

KW Central A/C Unit _____

HP/KW Space Heater/Air Handler _____

KW Baseboard Heat _____

HP Motors 1/+ HP _____

KW Transformer/Generator _____

AMP Service _____

AMP Subpanels _____

AMP Motor Control Center _____

KW Elec. Sign/Outline Light _____

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

UCC/F-120
Professional Printing
(856) 468-7933

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



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

Block 1192r28 Lot 5 Qualification Code _____
Work Site Location 12 Kats Rd

Owner in Fee: SUPD e-mail _____

Address 1192r28 street municipality zip code

Contractor: ORJ ELECTRIC, INC. Tel. (732) 920-0120

Address PO BOX 764 (523 EISENHOWER DR.)

Contractor License No. 2742 Exp. Date 3/12

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

Federal Emp. ID No. 300020750 FAX: (732) 939-3525

B. ELECTRICAL CHARACTERISTICS

Use Group: Present _____ Proposed _____
[] Pole/Pad # [] Temporary [] Other _____

Building Occupied as _____ Utility Co. _____

Estimated Cost of Electrical Work \$ 135.00

JOB SUMMARY (Office Use Only)		INSPECTIONS		Dates (Month/Day)	
PLAN REVIEW	Type:	Failure	Approval	Initial	
[] No Plans Required <u>5-19-9</u> <u>7-2</u> Date: Initial: _____	Rough				
	Barrier-Free				
	Trench				
	Temp. Serv.				
	Constr. Serv.				
Joint Plan Review Required [] Building [] Plumbing [] Fire [] Elevator [] Elec. Plans Approved Date: _____	TCO				
	Other				
	Service				
	Final				
	Barrier-Free				
SUBCODE APPROVAL [] CO [] CC0 [] CA Date: _____	Temp. Cut-in-Card Date Issued				
	Final Cut-in-Card Date Issued				
	Annual Pool Inspection				
	Date of Grounding and Bonding				
	Certification				

1. White-Inspector Copy
2. Canary-Applicant Copy
3. Pink-Office Copy
4. White Tag-Office Copy



Date Received
Date Issued
Control #
Permit #

C. CERTIFICATION IN LIEU OF OATH

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Applicant Signature/Contractor's Seal and Signature

[] Licensed Elec. Contractor [] Certif'd Landscape Irrigation Contr'r [] Electrician

D. TECHNICAL SITE DATA

QTY. SIZE ITEMS

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Receptacles
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Detectors
Light Poles
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Emergency & Exit Lights
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Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UW Lights
Storable Pool/Spa/Hot Tub
KW Elec. Rang/Receptacle
KW Over/Surface Unit
KW Elec. Water Heater
KW Elec. Dryer/Receptacle
KW Dishwasher
HP Garbage Disposal
KW Central A/C Unit
HP/KW Space Heater/Air Handler
KW Baseboard Heat
HP Motors 1/+ HP
KW Transformer/Generator
AMP Service
AMP Subpanels
AMP Motor Control Center
KW Elec. Sign/Outline Light

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

UCC/F-120
Professional Printing
(856) 468-7933

DATE _____

JOB CONDITION / COMMENTS