BLOCK 848 LOT 6.01 QUALIFICATION CODE _____ ADDRESS (SITE) 1726 FORGE POND ROAD PERMIT NO. 13-1612

CONSTRUCTION PERMIT APPLICATION

Applicant Completes: Sections I, II, III (optional), IV, VI, and VII C-13-0019606

I. IDENTIFICATION

1. Proposed Work Site at: 1726 FORGE POND ROAD BRICK
2. Name of Owner in Fee: TIM HAGEMANN
   Tel [redacted] e-mail _____
   Address SAME (street / municipality / zip code)
3. Ownership in Fee: Public _____ Private X
4. Principal Contractor: Gold Medal Plumbing Heating Cooling Electric, Inc Tel. (732) 390-3725
   Address 11 Cotters Lane e-mail _____
   East Brunswick, NJ 08816
   License No. OR, if new home, Builder Reg. No. 12777 Exp. Date _____
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. 830357354 FAX: (732) 390-3793
5. Architect or Engineer _____ Contact _____
   Address _____ e-mail _____
   Tel. _____ FAX: _____
6. Responsible Person in Charge once Work has Begun JOE TODARO ✓
   Tel. (732) 390-3725 FAX: (732) 390-3793

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical			
3. Plumbing		60 ✓	
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee		3	
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$	63	

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 03 2013							
☐ Electrical									
☒ Plumbing	1,600				4/8/13				
☒ Fire Protection	100								
☐ Elevator									
TOTAL COST	$1,700								

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 7/22/2013
Control Number C-13-001966
Permit Number 13-1612
Permit Issue Date 4/15/2013
Certificate Number 13-1612

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1726 FORGE POND RD. Brick Township, NJ Block: 848 Lot: 6.01 Qual:

Owner in Fee: TAMKE, CHRISTINE

Owner Address: 1726 FORGE POND RD BRICK NJ 08724

Telephone: [redacted]

Contractor GOLD MEDAL PLUMBING HEATING/COOLING ELECTRIC INC

Address 11 COTTERS LN EAST BRUNSWICK NJ 08816

Telephone: (732) 390-3725 Fax: (732) 390-3791

License Number or Builders Registration Number: 9734 11918 13VH02738600 Federal Emp. Number: 830-357354

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: HOT WATER HEATER

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: 7/22/2013 U.C.C. F260 (rev. 08/05)

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.

(X) Check if contractor.

Agent Name Gold Medal Plumbing Heating Cooling Electrc, Inc

Address 11 Cotters Lane

East Brunswick, NJ 08816

Telephone (732) 390-3725

Signature _____

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

called Cont.
4/10/13

CONSTRUCTION PERMIT

Date Issued 4/15/13
Control # C-13-001966
Permit # 131612

IDENTIFICATION Block: 848 Lot: 6.01 Qualifier
Work Site Location: 1726 FORGE POND RD. Brick Township, NJ
Owner in Fee TAMKE, CHRISTINE
1726 FORGE POND RD BRICK NJ 08724
Telephone: [redacted]

Contractor GOLD MEDAL PLUMBING HEATING/COOLING
Address 11 COTTERS LN EAST BRUNSWICK NJ 08816
Telephone: (732) 390-3725
Lic. No. or Bldrs. Reg. No. 9734
Federal Employee. No. 830-357354

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:
HOT WATER HEATER

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$60
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$3
CO Fee	
Other	$0
Total	$63
Check No.	5899
Cash	$0
Credit	$0
Collected By	

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 $1,600

Daniel J. Newman Jr. 4/9/13
Construction Official Date

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.

#1612
PLUMBING $60.00
DCA $3.00
CHECK $63.00

☑ 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.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 4/15/13
Control #

Date Issued
Permit # 13-1612

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

Block 848 Lot 6.01 Qualification Code

Work Site Location 1726 FORGE POND ROAD BRICK

Owner in Fee: TIM HAGEMANN

Tel. [redacted] e-mail

Address SAME

Contractor: Gold Medal Plumbing Heating Cooling Electric, Inc (street / municipality) Tel. (732) 390-3725 (zip code)

Address 11 Cotters Lane e-mail

East Brunswick, NJ 08816

Contractor License No. 12777 Exp. Date

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

Federal Emp. ID No. 830357354 FAX: (732) 390-3793

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 $ 1,600

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[ ] Plumbing Plans Approved
Date: 4/18/13 Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 4-9-13
Approved by: RV

SUBCODE APPROVAL for CERTIFICATE
[ ] 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				
Final				

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 Todaro

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
REPLACE 40 GAL WATER HEATER

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	
1	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	
	Other	

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.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control # 4/15/13

Date Issued
Permit # 13-1612

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

Block 848 Lot 6.01 Qualification Code _____

Work Site Location 1726 FORGE POND ROAD BRICK

Owner in Fee: TIM HAGEMANN

Tel. [redacted] e-mail _____

Address SAME

Contractor: Gold Medal Plumbing Heating Cooling (street) Electric, Inc (municipality) Tel. (732) 390-3725 (zip code)

Address 11 Cotters Lane e-mail _____

East Brunswick, NJ 08816

Contractor License No. 12777 Exp. Date _____

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

Federal Emp. ID No. 830357354 FAX: (732) 390-3793

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 $ 1,600

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: _____ Approved by: _____

[ ] Plumbing Plans Approved

Date 4/8/13 Approved by: [signature]

Joint Plan Review Required:

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

SUBCODE APPROVAL for PERMIT

Date: 4-5-13

Approved by: [signature]

SUBCODE APPROVAL for CERTIFICATE

[ ] 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				
Final				

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here: [signature]

Print name here: Joe Todaro

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

REPLACE 40 GAL WATER HEATER

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	
1	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 _____	
	Other _____	

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.

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received Control # 4/15/13

Date Issued Permit # 13-1612

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

Block 848 Lot 6.01 Qualification Code

Work Site Location 1726 FORGE POND ROAD BRICK

Owner in Fee: TIM HAGEMANN

Tel. [redacted] e-mail

Address SAME

Contractor: Gold Medal Plumbing Heating Cooling Electric, Inc (street / municipality) Tel. (732) 390-3725 (zip code)

Address 11 Cotters Lane e-mail

East Brunswick, NJ 08816

Contractor License No. 12777 Exp. Date

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

Federal Emp. ID No. 830357354 FAX: (732) 390-3793

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 $ 1,600

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Plumbing Plans Approved

Date 4/16/13 Approved by:

Joint Plan Review Required:

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

SUBCODE APPROVAL for PERMIT

Date: 4-9-13

Approved by: RV

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [X] CA

Date: 07.19.13

Approved by: PA

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	6-28-13		7-19-13	

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 Todaro

[X] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

REPLACE 40 GAL WATER HEATER

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	
1	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	
	Other	

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.

CHIMNEY VERIFICATION FOR REPLACEMENT OF FUEL-FIRED EQUIPMENT

BLOCK 848 LOT 6.01 QUALIFICATION CODE _____ PERMIT # _____

WORK SITE ADDRESS 1726 FORGE POND ROAD BRICK

Owner in Fee TIM HAGEMANN

Verifying Individual Joe Todaro Company Gold Medal PHCE

Address 11 Cotters Lane (Street) East Brunswick (City) NJ (State) 08816 (Zip Code)

Tel: (732) 390-3725 Fax: (732) 390-3793

Check the Appropriate Box(es):

Type of Replacement:

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

Existing Vent/Chimney: **Size** _____

- [ ] "B" Label Vent
- [ ] "L" Label Vent
- [ ] Flexible Liner
- [ ] Power Vent/Exhauster

- [X] Chimney-Interior
- [ ] Chimney-Exterior
- [X] Masonry Chimney-Tile Lined
- [ ] Masonry Chimney-Unlined
- [ ] Other _____

	Type	Fuel Type	BTU Rating (input/hour)
Appliance 1:	WATER HEATER	Oil / Gas / Other: GAS	40000
Appliance 2:		Oil / Gas / Other:	
Appliance 3:		Oil / Gas / Other:	

CHIMNEY LINER

If a chimney liner is being installed, all documentation on the liner must accompany the Permit application.

Manufacturer: _____ Model: _____ UL Listing: _____

Material of Liner: Stainless Steel _____ Aluminum _____

Size of Appliance Vent: _____ Size of Liner: _____ Height of Chimney: _____

Length of Connector: _____ Vent Connector Rise: _____

How does the appliance vent? [ ] Natural Draft [ ] Fan-assisted [ ] Other: _____

PLEASE SIGN ONE OF THE FOLLOWING VERIFICATION STATEMENTS

For Oil or Coal to Gas Conversions:

I have verified that the chimney/vent is in good repair and clear of obstruction and is substantially clean of residue from its previous use serving an oil or coal appliance. I have verified that the chimney/vent is appropriately lined and sized for the appliance(s) being installed.

Signature _____ Date _____

Oil to Oil or Gas to Gas Replacements or New/Additional Appliances:

I have verified that the existing chimney/vent is in good repair and clear of obstruction. I have verified that the existing chimney/vent is appropriately lined and sized for the appliance(s) being installed and/or remaining.

Signature _____ Date _____

Direct Vent Appliance:

I hereby verify that the appliance(s) being installed is a direct vent appliance. I further verify that the existing chimney/vent is appropriately lined and sized for any remaining appliances.

Signature _____ Date _____

Verification Not Submitted:

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

Signature _____ Date _____

FOR MINOR AND EMERGENCY WORK, THIS FORM MUST BE PROVIDED WITH YOUR PERMIT APPLICATION. FOR ALL OTHER WORK, THIS FORM MUST BE PRESENTED TO THE CODE OFFICIAL PRIOR TO FINAL INSPECTION.

All applicable information requested on this form must be supplied.
This form may not be submitted by a homeowner in lieu of the required inspection.

Professional™ Gas Water Heaters

Available in 38, 40 and 50 Gallon Tall – 40 Gallon Short Gas Models

- **8-Year* Limited Tank and Parts Warranty with a Professional Installation.**
- **With ProtectionPlus™ the 8-Year Limited Tank Warranty Becomes 12 Years!**

Guardian System™
- One-of-a-kind air/fuel shut-off device offers double protection
- Maintenance free – no filter to clean
- Standard replacement parts

Environmentally Friendly Burner
- Low NOx design for low nitrous oxide emissions

Self-Cleaning
- EverKleen™ patented system fights sediment build-up
- Reduces fuel costs
- Provides more hot water

Easy to Light
- No matches required

Energy Efficient
- More hot water at low operating cost

High Altitude Compliant
- All models are certified for applications up to 6,000 feet above sea level

Longer Life
- Patented magnesium anode rod design incorporates a special resistor that protects the tank from rust

Plus...
- Brass drain valve and temperature and pressure relief valve are included
- Meets or exceeds National Appliance Energy Conservation Act (NAECA) requirements

*See Residential Warranty Information Brochure for complete warranty information.

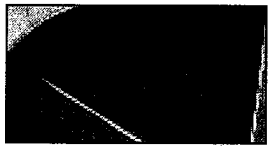
Energy Factor and Average Annual Operating Costs based on D.O.E. (Department of Energy) test procedures. D.O.E. national average fuel rate natural gas 91¢/therm; LP $1.23/gallon.

DESCRIPTION			FEATURES					ROUGHING IN DIMENSIONS (SHOWN IN INCHES)									ENERGY INFO.	
TYPE	GAL. CAP.	MODEL NUMBER	GAS INPUT IN THOUS. BTU/HR. NAT.	GAS INPUT IN THOUS. BTU/HR. LP	RECOVERY IN G.P.H. 90° RISE NAT.	RECOVERY IN G.P.H. 90° RISE LP	FIRST HOUR DEL. G.P.H. NAT.	HT. TO VENT A	TANK HT. B	DIAM. C	HT. TO GAS CONN. D	VENT SIZE E	WATER CONN. CNTR. F	HT. TO SIDE T&P G	WATER CONN. H	SHIP. WT. (LBS)	ENERGY FACTOR NAT.	AVG. ANN. OPER. COST NAT.
TALL	38	42V40 PROF	40	34	40.4	34.3	68	61-1/4	57-3/4	19-3/4	14-1/2	3	8	52-1/4	3/4	125	0.60	$227
	40	RHG PRO40-40F	40	34	40.4	34.3	68	63-1/4	59-3/4	21	14-1/2	3	8	53-1/2	3/4	135	0.62	$220
	50	RHG PRO50-40F	40	36	40.4	36.4	83	62-1/4	58-3/4	23	14-1/2	3	8	52-1/2	3/4	165	0.62	$220
	50	42V50-40 PROF	40	–	40.4	–	83	61-1/2	58	21-3/4	14-1/2	3	8	52-1/2	3/4	150	0.58	$235
	50	RHG PRO50-50F	50	–	50.6	–	83	62	58	21-3/4	14-1/2	4	8	52-1/2	3/4	150	0.58	$235
SHORT	40	42V40S-40 PROF	40	36	40.4	36.4	70	53	49-1/2	21-3/4	14-1/2	3	8	44	3/4	133	0.59	$231

SPECIFY LP GAS WHEN ORDERING. Add "P" suffix to the model number: Example: RHG PRO40-40PF.
For high altitude applications of 6,000 to 10,000 feet above sea level, add "H" suffix to the model number: Example: 42V50-40 PROHF.

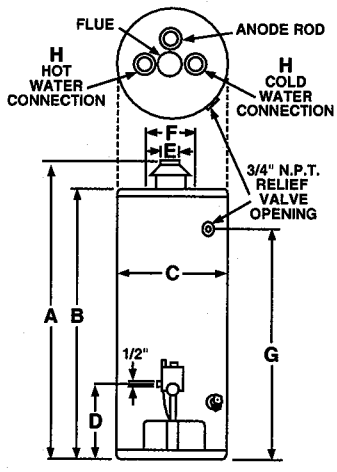
Rheem Guardian System Features...

Exclusive Combustion Shut-off System
Should a spill incident occur, the Guardian System shuts off the gas supply and the air supply preventing a sustained vapor burn in the combustion chamber.



Flame Arrestor Plate
A specially-designed flame arrestor prevents ignition of vapors outside the combustion chamber.

Maintenance Free
Superior air filtration prevents the flame arrestor from becoming clogged by lint, dust and oil.



These units are designed to meet or exceed ANSI (American National Standards Institute) requirements and have been tested according to D.O.E. test procedures and meet or exceed the energy efficiency requirements of NAECA, ASHRAE standard 90, ICC Code and all state energy efficiency performance criteria for energy consuming appliances.

Before purchasing this appliance, read important energy cost and efficiency information available from your supplier.

Exclusive Professional Installation Warranty

When this Rheem PROFESSIONAL water heater is installed by a licensed contractor, the consumer can upgrade his limited tank and parts warranty from 6 to 8 years by returning to Rheem the warranty registration card and a copy of the contractor's invoice.

This Rheem exclusive warranty upgrade feature enhances your value as a plumbing professional. A professional installation is a better installation.

Refer to the warranty certificate enclosed with each heater for specific details.

PROTECTIONPLUS™

8 YEAR LIMITED TANK WARRANTY BECOMES 12

For more details, see form 101-7.

In keeping with its policy of continuous progress and product improvement, Rheem reserves the right to make changes without notice.

Rheem Water Heaters • 101 Bell Road, Montgomery, Alabama 36117-4305 • www.rheem.com

PRINTED IN U.S.A 10/04 WP FORM NO. 101-14 Rev. 5

New Search

Block:	848	Prop Loc:	1726 FORGE POND RD.	Owner:	TAMKE, CHRISTINE	Square Ft:	0
Lot:	6.01	District:	1507 BRICK	Street:	1726 FORGE POND RD	Year Built:	
Qual:		Class:	2	City State:	BRICK NJ 08724	Style:	

Additional Information

Prior Block:	848.3	Acct Num:	00414940	Addl Lots:		EPL Code:	0 0 0
Prior Lot:	6.A	Mtg Acct:		Land Desc:	.4649AC	Statute:	
Prior Qual:		Bank Code:	660	Bldg Desc:	1SF 1398	Initial:	000000 Further: 000000
Updated:	09/19/07	Tax Codes:	F02	Class4Cd:	0	Desc:	
Zone:	R10	Map Page:	45.1	Acreage:	0.4649	Taxes:	5189.00 / 0.00

Sale Information

Sale Date:	07/06/04	Book:	12163 Page: 608	Price:	1 NU#: 25

Sr1a	Date	Book	Page	Price	NU#	Ratio	Grantee
More Info	07/06/04	12163	608	1	25	0	TAMKE, CHRISTINE
More Info	07/06/04	13030	1055	1	4	0	TAMKE, CHRISTINE

TAX-LIST-HISTORY

Year	Owner Information	Land/Imp/Tot	Exemption	Assessed
2012	TAMKE, CHRISTINE	127400	0	260100
	1726 FORGE POND RD	132700		
	BRICK NJ 08724	260100		
2011	TAMKE, CHRISTINE	127400	0	260100
	1726 FORGE POND RD	132700		
	BRICK NJ 08724	260100		
2010	TAMKE, CHRISTINE	127400	0	260100
	1726 FORGE POND RD	132700		
	BRICK NJ 08724	260100		
2009	TAMKE, CHRISTINE	49400	0	119400
	1726 FORGE POND RD	70000		
	BRICK NJ 08724	119400		

37347