



CONSTRUCTION PERMIT APPLICATION

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

Called 3/18

I. IDENTIFICATION

1. Proposed Work Site at: 1672 FORGE POND RD. BRICK NJ 08724

2. Name of Owner in Fee: DESHOND BROWN Tel. [REDACTED]
 Address SAME AS ABOVE
street municipality zip code

3. Ownership in Fee: Public _____ Private X

4. Principal Contractor: BRICK TWO HEATING & A/C Tel. (732) 477-3300
 Address 465 BRICK BLVD BRICK NJ 08723
 License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
 Federal Employee No. 21-0703175 FAX: (_____) _____
 5. Architect or Engineer _____ Tel. (_____) _____
 Address _____
 6. Responsible Person in Charge of Work CRAIG LAW
 Tel. (732) 477-3300 FAX (732) 477-0205

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>35</u>		
2. Electrical	\$ <u>53</u>		
3. Plumbing	\$ <u>35</u>		
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	\$ _____		
7. Less 20% for State Plan Review			
8. Subtotal	\$ _____		
9. DCA Training Fee			
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	\$ <u>173</u>		

VI. BUILDING/SITE CHARACTERISTICS

- (office use only)
- Number of Stories _____
 - Height of Structure _____ ft.
 - Area — Largest Floor _____ sq. ft.
 - New Building Area _____ sq. ft.
 - Volume of New Structure _____ cu. ft.
 - Construction Classification _____
 - Total Land Area Disturbed _____ sq. ft.
 - Flood Hazard Zone _____
 - Base Flood Elevation _____ ft.
 - Wetlands yes _____
no _____
 - Max. Live Load _____
 - Max. Occupancy Load _____

INSTALLATION OF AN OVERHEAD CENTRAL A/C SYSTEM

II. PROPOSED WORK	Est. Cost	OPTIONAL (for office use only)							
		Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition									
4. ☒ Alteration	300.00				3-12-02	FD	4/9/02		
5. ☐ Fire Protection									
6. ☒ Plumbing	100.00				3-15-02	SD	4/10/02		
7. ☒ Electrical	400.00				3/12/02	FD	4/9/02		
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	<u>800.00</u>								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

- ☐ Hotels (R-1)
- ☐ Multi-Family (R-2)
- ☐ Two-Family (R-3) BOCA
- ☐ Two-Family (R-4) CABO
- ☒ One-Family (R-3) BOCA
- ☐ One-Family (R-4) CABO

No. of dwelling units:

Before Construction _____
 After Construction _____
 Net Gain or Loss _____

B. NON-RESIDENTIAL

- State Specific Use:
- Use Group:
- Change in Use Group, Indicate Former:

III. DO YOU WANT: (optional)

- ☐ Partial Releases
- ☐ Prototype Processing

IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?

- | | |
|---|---|
| 1. ☐ Elevators/Escalators/Lifts/
Dumbwaiters/Moving Walks | 5. ☐ Cross-Connections/Backflow Preventers |
| 2. ☐ High Pressure Boilers | 6. ☐ Hazardous Uses/Places of Assembly |
| 3. ☐ Pressure Vessels | 7. ☐ Sprinklers |
| 4. ☐ Refrigeration Systems | 8. ☐ Smoke Control Systems in Open Wells |
| | 9. ☐ Underground Storage Tanks |

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

- C. ☐ I further certify that I will perform or supervise the following work:

C.1. ☐ Building C.2. ☐ Fire Protection

I further certify that I will perform the following work:

C.3. ☐ Electrical C.4. ☐ Plumbing

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

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

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

Signature _____ Date _____

II. AGENT SECTION (to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(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 BRICK TOP HEATING & A/C
Address 465 BRICK BLVD.
BRICK NJ 08723
Telephone (732) 477-3300
Signature [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	Other
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. _____	_____	_____	_____

TOWNSHIP OF ENICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 03/23/2002
Control #
Permit 0 02-0788

UCC NEW JERSEY
CONSTRUCTION
PERMIT

IDENTIFICATION Block 828 Lot 16 Parcel

Map Site Location 1675 FORCE FORD RD
A/C OVERSEER

Owner In Fee ENICK, NICH
Address SAME
CITY OF ENICK

Telephone [REDACTED]

Contractor PRITCHETT, JIM HEATING & A/C
Address 445 RICE BLVD
ENICK, NJ 08724
Telephone (908) 777-3300
Lic. No. or Plats. Reg. No.
Federal Exp. No. 21-0703175

It is hereby granted permission to perform the following work:

- EX1 BUILDING (1) FLUENT (1) LEAD BASED ADHESION
- EX2 ELECTRICAL (1) FIRE PROTECTION (1) PERMIT
- EX3 ELEVATOR SERVICES (1) ASBESTOS ABATEMENT (1) OTHER

DESCRIPTION OF WORK:
INSTALL OVERHEAD CABLE & CABLE SYSTEM
DUCTWORK TO BE IN ATTIC SPACE

(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 \$00

Construction Official [Signature]
03/23/2002

PAYMENTS (Office Use Only)

Building	25
Electrical	32
Plumbing	35
Fire Protection	0
Elevator Services	0
Other	0
BGA Training Fee	0
Cert. of Occupancy	0
Other	0
Total	122
Check No.	6882
Cash	
Collected By	SRP

03/24/02 10:23 AM PROJECT#0360
XEROX SERV. 007

3102788
BUILDING 435.00
ELECTRIC 655.00
PLUMBING 635.00
CHECK 1,725.00

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION

Date Received 03/11/2002
Date Issued 3/1/02
Control # C11-109
Permit # 02-0788

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

Block 838 Lot 16 Qual
Work Site Location 1572 FORGE POND RD
A/C OVERHEAD

Owner in Fee BROWN, HELEN
Address SAME
BRICK, NJ 08724-

Tele. [REDACTED]
Contractor BRICKTOWNSHIP HEATING & A/C
Address 465 BRICK BLVD
BRICK, NJ 08724-

Tele. (908) 477-3300 Fax [REDACTED]
Lic. No. or Blafs. Reg. No.
Federal Emp. No. 21-0703175

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Dates (Month/Day)
☒ No Plans Req. <i>3/10/02</i>			Type	Failure
☒ All			Footings	Approval
☐ Footing			Foundation	Initial
☐ Foundation			Slab	
☐ Frame			BarrierFree	
☐ Other			Insulation	
Joint Plan Review Required:			Finishes	
☐ Elect ☐ Plumb ☐ Fire			Energy	
SUBCODE APPROVAL ☐ Elev			Mechanical	
☐ CO ☐ CCO ☐ CA			TCO	
Date: <i>4-9-02</i>			Other	
Approved By: <i>[Signature]</i>			Final	
			BarrierFree	

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	R-3
Constr. Class	Present	Proposed	
No. of Stories	0	0	
Height of Structure	0 Ft.	0 Ft.	
Area Largest Floor	0 Sq. Ft.	0 Sq. Ft.	
New Bldg. Area/All Floors	0 Sq. Ft.	0 Sq. Ft.	
Volume of New Structure	0 Cu. Ft.	0 Cu. Ft.	
Total Land Area Disturbed	0 Sq. Ft.	0 Sq. Ft.	

Est. Cost of Bldg. Work:

1. New Bldg. \$ 0
2. Alteration \$ 300
3. Total (1+2) \$ 300

Industrialized Building:

☐ State Approved
☐ HUD

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.

Signature

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

INSTALL OVERHEAD CENTRAL A/C SYSTEM

ductwork in attic

TYPE OF WORK	FEE (Office Use Only)
☐ New Building	\$ 0
☐ Addition	0
☒ Alteration	11
☐ Roofing	0
☐ Siding	0
☐ Fence 0 Height (exceeds 6')	0
☐ Sign 0 Sq. Ft.	0
☐ Pool	0
☐ Asbestos Abatement Subchapter 8	0
☐ Lead Haz. Abatement NJAC 5:17	0
☐ Other	0
☐ Demolition	0

Administrative Surcharge

Paid ☐ Check \$
Collected by: DCA Training Fee
TOTAL FEE \$ 35
U.C.C. Fee \$ 0

**TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS**

**UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION**

**Date Received 03/11/2002
Date Issued 3/1/02
Control # 64-109
Permit # 02-07**

**3. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION WHEN TECHNICAL
CONFESSIONS. NOTIFY THIS OFFICE. CALL UTILITY DIVISION: 1-800-272-1090**

Block 23 Lot 11 Sub 1

Work Site Location 1022 PERRY RD BRICK NJ

APPLICANT

Owner DR. LEECH, JR.

Address SPUR

BRICK, NJ 07024

Phone [REDACTED]

Contractor BRICKMAN'S BUILDING, INC.

Address 402 BRICK RD.

BRICK, NJ 07024

Phone 609-977-1000 Fax 609-977-1001

City BRICK State NJ Zip 07024

Federal Emp. No. 21-5792173

FOR SEWER (Office Use Only)

PLAN REVIEW Date Initial

By 11 No Plans Required 2/28/02

By 11

By 11

By 11

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INSPECTIONS

Type Foundation Date (Month/Day) Initial

Foundation Initial

Slab Initial

Frame Initial

Roofing Initial

Roofing Initial

Roofing Initial

Roofing Initial

Roofing Initial

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C. CERTIFICATION IN LIEU OF DATE

I hereby certify that I am the owner of the
of record and am authorized to date this application.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

INTERNAL OVERHEAD CENTRAL A/C SYSTEM

21-5792173

21-5792173

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B. BUILDING CHARACTERISTICS

Use Group Present Proposed P-3

Construction Class Present Proposed 1. New Bldg. 3

No. of Stories 3 2. Alteration 3

Height of Structure 3 3. Total (1+2+3) 300

Area Largest Floor 3 Sq. Ft.

Area Bldg. Area All Floors 3 Sq. Ft.

Volume of New Structure 3 Cu. Ft.

Total Land Area Disturbed 3 Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. 3

2. Alteration 3

3. Total (1+2+3) 300

Industrialized Building:

1. State Approved

2. State Approved

3. State Approved

Administrative Surcharge

Uniform Fee

TOTAL FEE

DCB Training Fee

DCB Training Fee

DCB Training Fee

**TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS**

**UCC NEW JERSEY
BUILDING
SUBCODE
TECHNICAL SECTION**

Date Received 03/11/2002
Date Issued 3/1/02
Control # 644499
Permit # 02-0788

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

Block 833 Lot 1C Qual _____
Work Site Location 1672 ROUGH POND RD
A/C GREENHEAD

Owner in Fee BROWN, HELEN
Address SAME
BRICK, NJ 08724-

Tele. _____
Contractor BRICKTOWNSHIP HEATING & A/C
Address 465 BRICK BLVD
BRICK, NJ 08724-

Tele. (908)477-3300 Fax () _____
Lic. No. or Bldgs. Reg. No. _____
Federal Exp. No. 21-0703175

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial
☒ No Plans Req. 3/20/02
☐ All
☐ Footing
☐ Foundation
☐ Slab
☐ Frame
☐ Other
Joint Plan Review Required:
☐ Elect ☐ Plumb ☐ Rite
SUBCODE APPROVAL ☐ Eter
☐ CO ☐ CCO ☐ CA
Date: _____
Approved By: _____

INSPECTIONS	Dates (Month/Day)	Initial
Type		
Failure		
Failure Approval		
Initial		
BarrierFree		
Insulation		
Finishes		
Energy		
Mechanical		
TCO		
Other		
Final		
BarrierFree		

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	H-3	Est. Cost of Bldg. Work:
Constr. Class	Present	Proposed		1. New Bldg. \$ 0
No. of Stories	0	0		2. Alteration \$ 300
Height of Structure	0 Ft.	0 Ft.		3. Total (1+2) \$ 300
Ave'd Largest Floor	0 Sq. Ft.	0 Sq. Ft.		
New Bldg. Area/All Floors	0 Sq. Ft.	0 Sq. Ft.		
Volume of New Structure	0 Cu. Ft.	0 Cu. Ft.		
Total Land Area Disturbed	0 Sq. Ft.	0 Sq. Ft.		

Industrialized Building:
☐ State Approved
☐ HCB

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.

Signature _____

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK

INSTALL OVERHEAD CENTRAL A/C SYSTEM

ductwork in attic

TYPE OF WORK	DESCRIPTION	HEIGHT (exceeds 6')	FEES (Office Use Only)
☐ New Building			\$ 0
☐ Addition			\$ 0
☒ Alteration			\$ 11
☐ Roofing			\$ 0
☐ Siding			\$ 0
☐ Fence			\$ 0
☐ Sign			\$ 0
☐ Pool			\$ 0
☐ Asbestos Abatement Subchapter 8			\$ 0
☐ Lead Haz. Abatement NJAC 5:17			\$ 0
☐ Other			\$ 0
☐ Demolition			\$ 0

Paid ☐ Check \$ _____
Collected by: _____
Administrative Surcharge \$ 0
Minimum Fee \$ 74
TOTAL FEE \$ 35
DCA Training Fee \$ 0

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/11/2002
Date Issued 3/15/02
Control # 44-109
Permit # 02-0788

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING

CONTRACTORS. NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000

Block 838 Lot 16 Qual

Work Site Location 1672 FORGE POND RD

A/C OVERHEAD

Owner in Fee BROWN, HELEN

Address SAME

RIWAY NJ 08724-

Tele [REDACTED] Fax ()

Contractor EUREKA ELECTRIC

Address PO BOX 4073

BRICK, NJ 08723-

Tele (732) 255-2822

Lic. No. or Bldrs. Reg. No. 4872

Federal Emp. No. 22-1814013

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed R-3

[] Pole/Pad [] Temporary [] Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work \$ 400

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required

Joint Plan Review Required:

[] Bldg [] Plumb

[] Fire [] Elevator

[] Elect Plans Approved

Date: 3/13/02

Approved By: [Signature]

SUBCODE APPROVAL

[] CO [] CCO [] CA

Date: 4/8/02

Approved By: [Signature]

D. TECHNICAL SITE DATA

NO. SIZE

1 1

1 1

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ITEM

Lighting Fixtures

Receptacles

Switches

Detectors

Light Poles

Motors-Fract HP

Emergency & Exit Lights

Communications Points

Alarm Devices/F.A.C. Panel

TOTAL NUMBERS

Pool Permit/with UV Lights

Storable Pool/Spa/Hot Tub

KW Elect Range/Receptacle

KW Oven/Surface Unit

KW Elect Water Heater

KW Elect Dryer/Receptacle

KW Dishwasher

HP Garbage Disposal

KW Central A/C Unit

HP/KW Space Heater/Air Handler

Baseboard Heat

HP Motors 1/+ HP

KW Transformer/Generator

AMP Service

AMP Subpanels

AMP Motor Control Center

KW Elect Sign/Outline Light

Other

Other

Administrative Surcharge \$ 0

Minimum Fee \$ 0

TOTAL FEE \$ 53

DCA Training Fee \$ 0

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

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.

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 03/11/2002
Date Issued 3/12/02
Control # C11-1092
Permit # 0

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

B. TECHNICAL SITE DATA

FEE (Office Use Only)

Block 838 Lot 16 Parcel 16
Work Site Location 1672 FORGE ROAD RD
A/C OVERHEAD

Lighting Fixtures 1
Receptacles 1
Switches 0
Detectors 0
Light Poles 0
Motors-Fract HP 0
Emergency & Exit Lights 0
Communications Points 0
Alarm Devices/F.A.C. Panel 0
TOTAL NUMBERS 35

Owner in Fee BROWN, HELEN
Address SAME
BRICK, NJ 08724-
Tele. (732) 235-2872
Contractor EUREKA ELECTRIC
Address PO BOX 4075
BRICK, NJ 08723-
Tele. (732) 235-2872
Lic. No. or Bldg. Reg. No. 4872
Federal Exp. No. 22-1814012

Pool Permit/with UV Lights 0
Storable Pool/Spa/Hot Tub 0
KV Elect Range/Receptacle 0
KV Oven/Surface Unit 0
KV Elect Water Heater 0
KV Elect Dryer/Receptacle 0
KV Dishwasher 0
HP Garbage Disposal 0
KV Central A/C Unit 0
HP/KV Space Heater/Air Handler 0
Baseboard Heat 0
HP Motors 1/4 HP 0
KV Transformer/Generator 0
AMP Service 0
AMP Subpanels 0
AMP Motor Control Center 0
KV Elect Sign/Outline Light 0
Other 0

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed R-1
[] Pole Pad [] Temporary [] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work \$ 400

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[] No Plans Required
[] Joint Plan Review Required:
[] Bldg [] Plumb
[] Fire [] Elevator
[] Elect Plans Approved
Date: 3/13/02
Approved By: [Signature]
SUBCODE APPROVAL
[] CO [] CCO [] CA
Date: [Signature]
Approved By: [Signature]

INSPECTIONS
Type Failure Failure Approval Initial
Rough
Temp Serv
Const Serv
TCC
Other
Service
Final
Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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.

Administrative Surcharge \$ 0
Minimum Fee \$ 0
TOTAL FEE \$ 33
OCA Training Fee \$ 0

Applicant's Signature/Contractor's Seal and Signature
[] Licensed Electrical Contractor [] Temporary Applicant

Paid [] Check #
Collected by: [Signature]
DCA Training Fee \$ 0

**TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS**

**UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION**

Date Received 03/11/2002
Date Issued / /
Control # C11-109
Permit #

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

Block 33 Lot 16 (cont)

Part Site Location 1071 FORGE ROAD RD

A/C OVERHEAD

Owner or Rep. SEPT. 2002

Address SHEP

Owner or Rep. SEPT. 2002

Phone [REDACTED] Fax [REDACTED]

Contractor EUREKA ELECTRIC

Address PO BOX 4015

BRICK, NJ 08723

Phone (732) 251-2223

Lic. No. of Master Elec. No. 4832

Federal Emp. No. 22-191813

B. ELECTRICAL CHARACTERISTICS

Are there - Present Proposed R-1

1 1 Pole Fed 1 1 Temporary 1 1 Other

Building Occupied by Utility Co.

Estimated Cost of Electrical Work \$ 400

JOB SHEET (Officer Use Only)

PLAN REVIEW

1 1 No Plans Required

1 1 No Plans Required

1 1 Rides 1 1 Plumb

1 1 Fire 1 1 Cleared

1 1 Elec. Plans Approved

Date 3/13/02

Approved by [Signature]

APPROVED APPROVAL

1 1 00 1 1 00 1 1 00

Date: [Signature]

Approved by:

C. TECHNICAL SITE DATA

NO. SIZE

ITEM

FEE (Officer Use Only)

Lighting Fixture

Receptacles

Switches

Detectors

Light Poles

Motor-Panel HP

Emergency Exit Lights

Occupations Points

Alarm Devices/F. C. Panel

TOTAL SHEETS

Pool Facility with 60' Electric

Storable Pool/Spa/Hot Tub

RV Electric Range Receptacle

RV Gas Surface Unit

RV Electric Water Heater

RV Electric Range Receptacle

RV Dishwasher

RV Stove/Disposal

RV Central AC Unit

RV LP Space Heater Air Handler

RV LP Space Heater

RV Motor, 1/4 HP

RV Transformer/Generator

RV Sewer

RV Sewer

RV Sewer

RV Water Control System

RV Electric Signaling Light

Other

Other

Other

Other

Other

Other

Other

Other

Other

Other

Other

Other

Administrative Surcharge \$

Manager Fee \$

TOTAL FEE \$

CCA Training Fee \$

UCC Fee \$

UCC Fee \$

UCC Fee \$

**TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS**

**UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION**

Date Received 03/11/2002
Date Issued 3/11/02
Control # CTF-109
Permit # 03-0788

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION, WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE, CALL UTILITY DIV. NO. 1-800-272-1090

Block 211 Lot 16 (see)

Work Site Location 1612 POND RD RD

A/C OVERHEAD

Contract for Rec. No. 37, RELEA

Address SAME

BRICK, NJ 08724-

Telephone () Fax ()

Contractor BRICKTOWNSHIP HEATING & A/C

Address 465 ELICA DR

BRICK, NJ 08724-

Tele. (201) 473-3300

Lic. No. of Owner, Rep. No.

Federal Emp. No. 21-0703175

B. PLUMBING CHARACTERISTICS

Use Group Present Prepared ()

Building Sewer Size () Public Sewer () Private Septic

Water Sewer Size () Public Water () Private Well

Estimated Cost of Plumbing Work \$ 100

C. JOB SUMMARY (Office Use Only)

PLAN REVIEW

Any Plans Required

Joint Plan Review Required:

() Old () Elect

() Fire () Elevator

() Plumb, Place Approved

Date: 3-15-02

Approved By: [Signature]

SUBCODE APPROVAL

() CO () COO () CA

Approved By:

Date:

INSPECTIONS Dates (Month/Day)
Type Failure Failure Approval Initial

Slab _____

rough _____

Water _____

sewer _____

fixtures _____

Gas Equip. _____

Gas Piping _____

Solar _____

TCO _____

D. TECHNICAL SITE DATA (List all fixtures)

NO. FIXTURES EQUIPMENT

Water Closet _____

Urinal Bidet _____

Bath Tub _____

Lavatory _____

Shower _____

Floor Drain _____

Sink _____

Dishwasher _____

Prinking Fountain _____

Washing Machine _____

Hose Bib _____

Water Heater _____

Fuel Oil Piping _____

Gas Piping _____

Steam Boiler _____

Hot Water Boiler _____

Sewer Pump _____

Interceptor, Separator _____

Backflow Preventer _____

GreaseTrap _____

Sewer Connection _____

Water Service Connection _____

Stack _____

Other 1 A/C _____

Other _____

Paid () Check # _____
Collected by: _____
Administrative Surcharge \$ _____
Division Fee \$ _____
TOTAL FEE \$ 35
PCA Training Fee \$ _____

Signature/Contractor Seal
() Licensed Plumbing Contractor () Licensed Applicant

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCG NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/11/2002
Date Issued 3/5/02
Control # 411-109
Permit # 03-0788

A. IDENTIFICATION-APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1090

D. TECHNICAL SITE DATA (List all fixtures.)

Block 833 Lot 16 Sub 1
Work Site Location 1672 FORGE POND RD

A/C OVERHEAD

Owner in Fee RICH, WELCH

Address SAME

BRICK, NJ 08724-

Telephone () Fax ()

Contractor BRICKTOWNSHIP HEATING & A/C

Address 463 BRICK BLVD

BRICK, NJ 08724-

Tele. (908) 417-1300

Lic. No. of Bldgs. Reg. No.

Federal Emp. No. 21-0703175

E. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-1
Building Sewer Size () Public Sewer () Private Septic
Water Sewer Size () Public Water () Private Well
Estimated Cost of Plumbing Work \$ 100

JOB SUMMARY (Office Use Only)

PERM REVIEW

() No Plans Required

Joint Plan Review Required:

() Bldg () Elect

() Fire () Elevator

() Plumb. Plans Approved

Date: 3-15-02

Approved By: [Signature]

SUBCODE APPROVAL

() CO () CCO () CA

Approved By:

Date:

INSPECTIONS
Type Failure Failure Approval Initial

Slab

Fough

Water

Sewer

Fixtures

Gas Equip.

Gas Piping

Solar

TCO

NO.

PICTURE/EQUIPMENT

FEE (Office Use Only)

Water Closet

Urinal / Bidet

Bath Tub

Lavatory

Shower

Floor Drain

Sink

Dishwasher

Drinking Fountain

Washing Machine

Hose Bib

Water Heater

Fuel Oil Piping

Gas Piping

Steam Boiler

Hot Water Boiler

Sewer Pump

Interceptor / Separator

Backflow Preventer

Grease Trap

Sewer Connection

Water Service Connection

Stacks

other 1 A/C

other

Administrative Surcharge \$ 0
Minimum Fee \$ 0
TOTAL FEE \$ 35

Paid () Check \$
Collected by:

DCA Training Fee \$ 0

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/Contractor Seal
() Licensed Plumbing Contractor () Elected Applicant

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 03/11/2002
Date Issued 3/15/02
Control # CH-109
Permit # 02-0788

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

D. TECHNICAL SITE DATA (List all fixtures.)

Block 838 Lot 16 Qual
Work Site Location 1672 FORGE POND RD

NO.

FEE (Office Use Only)

A/C OVERHEAD

Owner in Fee BROWN, HELEN

Address SAME

DRIVE RT 98724-

Tele () Fax ()

Contractor BRICKTOWNSHIP HEATING & A/C

Address 465 BRICK BLVD

BRICK, NJ 08724-

Tele. (908) 477-3300

Lic. No. or Bldgs. Reg. No.

Federal Emp. No. 21-0703175

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed R-3

Building Sewer Size [] Public Sewer [] Private Septic

Water Sewer Size [] Public Water [] Private Well

Estimated Cost of Plumbing Work \$ 100

C. JOB SUMMARY (Office Use Only)

PLAN REVIEW

[] No Plans Required

Joint Plan Review Required:

[] Bldg [] Elect

[] Fire [] Elevator

[] Plumb. Plans Approved

Date: 3-15-02

Approved By: DON

SUBCODE APPROVAL

[] CO [] CCO []

Approved By: []

Date: 4-10-02

INSPECTIONS

Type Failure Failure Approval Initial

Slab

Rough

Water

Sewer

Fixtures

Gas Equip.

Gas Piping

Solar

TCO

4/10-02

Paid [] Check \$

Collected by: []

Administrative Surcharge \$

Minimum Fee \$

TOTAL FEE \$

DCA Training Fee \$

Signature/Contractor Seal
[] Licensed Plumbing Contractor [] Exempt Applicant

CONDENSING UNITS

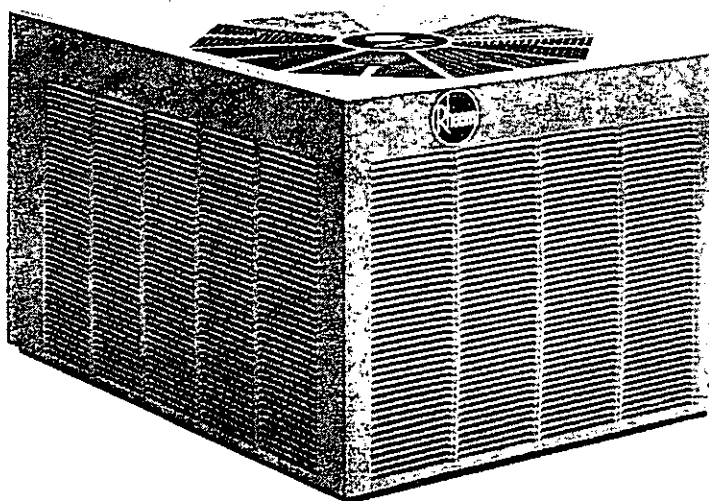


CLASSIC XII® SUPER HIGH EFFICIENCY CONDENSING UNITS

2 TON

RAMB- SERIES

Nominal Sizes 1½ to 5 Tons
[5.28 kW] to [17.58 kW]



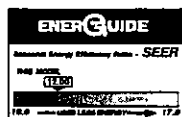
Seven Models

Cooling Capacities
18,100 to 55,000 BTU/HR
[5.30 kW] to [16.12 kW]

The Rheem® Classic XII Super High Efficiency RAMB-Condensing Unit was designed with performance in mind. These units offer comfort, energy conservation and dependability for single, multi-family and light commercial applications.

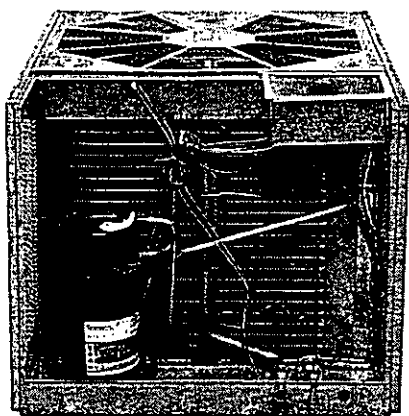
The Rheem Classic XII RAMB- Condensing Units are the result of an ongoing development program for improved efficiencies. With SEER's ranging to 13.7, these units continue a tradition of high efficiency.

- Attractive, louvered wrap-around jacket protects the coil from yard hazards and weather extremes. Top grille is steel reinforced for extra strength. Cabinet is powder painted for all-weather protection.
- Air is discharged upward away from bushes and shrubs. The discharge pattern of the top grille provides minimum air restriction, resulting in quiet fan operation.
- Exclusive Combination Grille/Motor Mount secures the motor to the underside of the discharge grille. The grille protects the motor windings and bearings from rain and snow.
- All controls are accessible by removing one service panel. Removable top grille provides access to the condenser fan motor and condenser coil.
- Single speed motor designed for low speed, quiet, energy-saving operation.

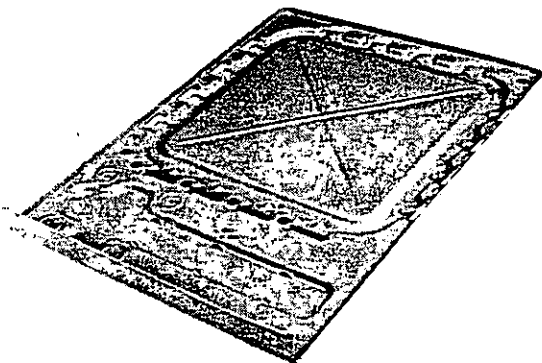


"CERTIFIED UNDER THE
A.R.I. CERTIFICATION
PROGRAM—A.R.I.
STANDARD 210"





All controls and compressor are accessible for servicing by removal of the service panel.



Drawn Painted Base Pan.

Engineering Features

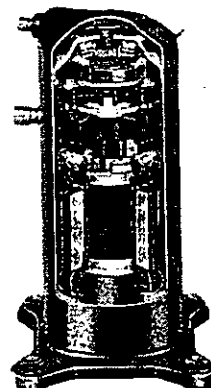
RAMB- Series Condensing Units

1. Scroll compressor is hermetically sealed and incorporates internal high temperature motor overload protection, and durable insulation on the motor windings. It is externally mounted on rubber grommets to reduce vibration and noise.
2. Compressors have an internal pressure relief assembly to protect against excessive pressure differential.
3. All refrigerant connections are on the exterior of the unit, located close to the ground for neat appearing installations.
4. Cabinet is constructed of powder painted galvanized steel. The full wraparound louvered grille protects the coil from damage.
5. Copper Tube—Aluminum Fin coils are used on all models.
6. The control box is located in the top corner of the cabinet providing for easy access through a service panel.
7. Service valves are standard on all models.
8. Power and control wiring are kept separate.
9. Every unit is factory charged and tested.
10. Separate compressor compartment for easy service access.
11. Drawn, painted base pan for extra corrosion resistance and sound reduction.
12. **RAMB—JAZ/ JBZ Series** has a **10 year compressor limited warranty**. The JAZ/CAZ Series has factory-installed low pressure control, high pressure control and a liquid line filter drier. The JBZ/CBZ Series does not contain factory-installed low pressure control, high pressure or a liquid line filter drier.

Field Installed Accessories

- **Compressor Time Delay Control**—Compressor will remain off for five minutes after power or thermostat interruption, allowing system pressures to equalize. (Model No. RXMD-B01)
- **Low Ambient Switch**—Cycles outdoor fan to maintain adequate condensing pressures assuring liquid refrigerant flow to the coil. Allows indoor cooling with outdoor temperatures down to 0°F [-17.8°C]. (Model No. RXAD-A04)

It is recommended that this control be installed in units to be operated at outdoor ambient temperatures under 65°F [18°C].



COPELAND® COMPLIANT SCROLL®

Copeland's new scroll compressor is the key to efficiency for this Rheem model. It's the latest in high-efficiency compressor technology. The advanced compliant scroll compressor offers low noise and vibration characteristics and features tolerance to liquid refrigerant and system contamination. The Copeland Compliant Scroll also has low start torque, eliminating start problems in the field. And its unique design enables the RAMB- condensing unit to perform efficiently, quietly and reliably.

Model Number Identification

<u>R</u>	<u>A</u>	<u>M</u>	<u>B</u>	<u>—</u>	<u>024</u>	<u>J</u>	<u>A*</u>	<u>Z</u>
RHEEM	CONDENSING UNIT	TYPE-M 12 SEER	DESIGN SERIES		NOMINAL COOLING CAPACITY	ELECTRICAL DESIGNATION	VARIATIONS	COMPRESSOR TYPE
					018 = 18,000 BTU/HR [5.28 kW]	J = 208/230-1-60	A = DELUXE MODEL	Z = COPELAND ZR COMPLIANT SCROLL COMPRESSOR
					024 = 24,000 BTU/HR [7.03 kW]	C = 208/230-3-60	B = BUILDER MODEL	
					030 = 30,000 BTU/HR [8.79 kW]			
					036 = 36,000 BTU/HR [10.55 kW]			
					042 = 42,000 BTU/HR [12.31 kW]			
					048 = 48,000 BTU/HR [14.07 kW]			
					060 = 60,000 BTU/HR [17.58 kW]			

*See Engineering Feature #12.

[] Designates Metric Conversions

Performance Data @ ARI Standard Conditions—Cooling (continued)

Model Numbers		80°F [26.5°C] DB/67°F [19.5°C] WB Indoor Air 95°F [35°C] DB/Outdoor Air					
Outdoor Unit: RAMB	Indoor: Coil (and/or Air Handler/Gas Furnace)	Total Capacity: BTU/H [kW]	Net Sensible: BTU/H [kW]	Net Latent: BTU/H [kW]	EER	SEER	Sound Rating
060JAZ/JBZ/CAZ/CBZ	RCHJ-60A1	55,000 [16.12]	38,033 [11.15]	16,967 [4.97]	10.60	12.00	7.8
	RCHJ-60A1 (RBHB-25)	55,000 [16.12]	38,033 [11.15]	16,967 [4.97]	10.80	12.00	7.8
	RCHJ-60A1 (RBHJ-25)	55,500 [16.27]	38,500 [11.28]	17,000 [4.98]	11.20	12.60	7.8
	RCHJ-60A1 (RGLH-12?ARM?)	55,000 [16.12]	38,033 [11.15]	16,967 [4.97]	10.80	12.10	7.8
	RCHJ-60A1 (RGPH-12?ARM?)	55,000 [16.12]	38,033 [11.15]	16,967 [4.97]	10.80	12.10	7.8
	RCHJ-60A1 (RGFD-12?RCM?)	54,500 [15.97]	37,533 [11.00]	16,967 [4.97]	10.55	11.90	7.8
	RCTB-A060	53,500 [15.68]	36,500 [10.70]	17,000 [4.98]	10.85	12.00	7.8
	RCTH-A060	54,000 [15.83]	37,287 [10.93]	16,713 [4.90]	10.45	11.10	7.8

Electrical and Physical Data

Model No. RAMB	ELECTRICAL							PHYSICAL					
	Phase Hertz Volts	Compr. RLA	Compr. LRA	Fan Motor FLA	Min. Circuit Ampacity Amps	Fuse or HACR Circuit Breaker		Outdoor Coil			R22 Oz. [g]	Weight	
						Min. Amps	Max. Amps	Face Area: Sq. Ft. [m ²]	No. Rows	CFM [L/s]		Net Lbs. [kg]	Shipping Lbs. [kg]
018JA/JB	1-60-208/230	9.0/9.0	41	.9	13/13	15/15	20/20	9.1 [845]	1.00	1960 [925]	60 [1701]	150 [68.0]	160 [72.6]
024JA/JB	1-60-208/230	10.9/10.9	54	.9	15/15	20/20	25/25	9.1 [845]	1.00	1950 [920]	66 [1871]	155 [70.3]	165 [74.8]
030JA/JB	1-60-208/230	13.5/13.5	72.5	1.3	19/19	25/25	30/30	11.0 [1022]	1.00	2700 [1274]	77 [2183]	169 [76.7]	179 [81.2]
036CA/CB	3-60-208/230	10.3/10.3	77	1.3	15/15	20/20	20/20	12.9 [1198]	1.00	4200 [1982]	93 [2637]	188 [85.2]	198 [89.8]
036JA/JB	1-60-208/230	16.1/16.1	88	1.3	22/22	30/30	35/35	12.9 [1198]	1.00	4200 [1982]	93 [2637]	188 [85.2]	198 [89.8]
042CA/CB	3-60-208/230	12.5/12.5	88	2.0	18/18	25/25	25/25	12.9 [1198]	1.00	4150 [1959]	96 [2722]	193 [87.5]	203 [92.0]
042JA/JB	1-60-208/230	18.0/18.0	104	2.0	25/25	30/30	40/40	12.9 [1198]	1.00	4150 [1959]	96 [2722]	193 [87.5]	203 [92.0]
048CA/CB	3-60-208/230	12.9/12.9	91	2.0	19/19	25/25	30/30	15.4 [1431]	2.00	3800 [1793]	162 [4593]	255 [115.7]	265 [120.2]
048JA/JB	1-60-208/230	19.3/19.3	137	2.0	27/27	35/35	45/45	15.4 [1431]	2.00	3800 [1793]	162 [4593]	255 [115.7]	265 [120.2]
060CA/CB	3-60-208/230	17.3/17.3	123	2.0	24/24	30/30	40/40	20.8 [1932]	2.00	3995 [1885]	192 [5443]	309 [140.2]	332 [150.6]
060JA/JB	1-60-208/230	28.9/28.9	169	2.0	38/38	50/50	60/60	20.8 [1932]	2.00	3995 [1885]	192 [5443]	309 [140.2]	332 [150.6]

[] Designates Metric Conversions

GENERAL TERMS OF LIMITED WARRANTY*

Rheem will furnish a replacement for any part of this product which fails in normal use and service within the applicable period stated, in accordance with the terms of the limited warranty.

Condenser Coil leaks caused by factory defects.....Five (5) Years
Compressor—Single Phase ModelsTen (10) Years
Compressor—Three Phase ModelsFive (5) Years
Any Other Part.....One (1) Year

*For Complete Details of the Limited Warranty, Including Applicable Terms and Conditions, See Your Local Installer or Contact the Manufacturer for a Copy.

BEFORE PURCHASING THIS APPLIANCE, READ IMPORTANT ENERGY COST AND EFFICIENCY INFORMATION AVAILABLE FROM YOUR RETAILER.

Condensing Unit Refrigerant Line Size Information

System Capacity Tons [kW]	Line Size (Inch O.D.) [mm]	Liquid Line Size Outdoor Unit Above Indoor Coil						Liquid Line Size Outdoor Unit Below Indoor Coil					
		Total Length—Feet [m]						Total Length—Feet [m]					
		25 [7.62]	50 [15.24]	75 [22.86]	100 [30.48]	125 [38.10]	150 [45.72]	25 [7.62]	50 [15.24]	75 [22.86]	100 [30.48]	125 [38.10]	150 [45.72]
		Vertical Separation—Feet [m]						Vertical Separation—Feet [m]					
1.5 [5.28]	1/4" [6.35]	25 [7.62]	50 [15.24]	70 [21.34]				25 [7.62]	23 [7.01]	8 [2.44]			
	5/16 [7.94]			36 [10.97]	42 [12.80]	48 [14.63]	54 [16.46]			36 [10.97]	30 [9.14]	24 [7.32]	18 [5.49]
2 [7.03]	1/4" [6.35]	25 [7.62]	50 [15.24]					25 [7.62]	23 [7.01]				
	5/16 [7.94]		24 [7.32]	34 [10.36]	44 [13.41]	54 [16.46]	64 [19.51]		48 [14.63]	38 [11.58]	28 [8.53]	18 [5.49]	8 [2.44]
2.5 [8.79]	1/4" [6.35]	25 [7.62]	50 [15.24]					25 [7.62]	23 [7.01]				
	5/16 [7.94]		19 [5.79]	33 [10.06]	47 [14.33]	61 [18.59]			50 [15.24]	39 [11.89]	25 [7.62]	11 [3.35]	
	3/8 [9.53]					11 [3.35]	15 [4.57]						57 [17.37]
3 [10.55]	5/16" [7.94]	25 [7.62]	50 [15.24]	70 [21.34]				25 [7.62]	23 [7.01]	9 [2.74]			
	3/8 [9.53]			34 [10.36]	40 [12.19]	46 [14.02]	52 [15.85]			38 [11.58]	32 [9.75]	26 [7.92]	20 [6.10]
3.5 [12.30]	5/16" [7.94]	25 [7.62]	50 [15.24]	75 [22.86]				25 [7.62]	23 [7.01]	9 [2.74]			
	3/8 [9.53]			32 [9.75]	39 [11.89]	46 [14.02]	53 [16.15]			40 [12.19]	33 [10.06]	26 [7.92]	19 [5.79]
4 [14.06]	3/8" [9.53]	25 [7.62]	44 [13.41]	53 [16.15]	61 [18.59]	70 [21.34]		25 [7.62]	28 [8.53]	19 [5.79]	11 [3.35]	3 [0.91]	
	1/2 [12.7]					37 [11.28]	39 [11.89]					35 [10.67]	33 [10.06]
5 [17.58]	3/8" [9.53]	25 [7.62]	48 [14.63]	61 [18.59]	72 [21.95]			25 [7.62]	23 [7.01]	11 [3.35]	3 [0.91]		
	1/2 [12.7]				35 [10.67]	38 [11.58]	41 [12.50]				37 [11.28]	34 [10.36]	31 [9.45]

* Standard line size

NOTES:

- This chart is applicable for condensing units.
- If the separation height exceeds the table values, reduce the indoor coil flow-check piston two sizes plus one size for each additional 10 feet (3.05 m).
Example 1: A 5 ton [17.58 kW] condensing unit with a total line length of 125 feet [38.10 m] with a vertical separation of 101 feet [30.78 m] utilizing a 1/2" [12.7 mm] liquid line: Table = 38 feet [11.58 m] maximum vertical separation for 125 feet [38.10 m] run. Separation exceeds table by (101-38) = 63 feet [19.20 m]. Therefore, reduce the indoor coil flow-check piston 2 + 6 = 8 sizes (For example, a #89 piston would reduce to a #81 piston).
- Do not exceed 120 feet [36.58 m] maximum vertical separation.
- No changes are required for expansion valve coils.
- Do not exceed table values for capillary tube coils.
- Always use the smallest liquid line possible to minimize system charge.
- Chart may be used to size horizontal runs.

NOTES:

- This chart is applicable for condensing units.
Example 1: A 2.5 ton [8.79 kW] condensing unit with a total line length of 75 feet [22.86 m] with a vertical separation of 30 feet [9.14 m] requires a liquid line size of 5/16" [7.94 mm].
- This chart may also be used to size horizontal runs.
Example 2: A 5 ton [17.58 kW] condensing unit may have a total horizontal run of 100 feet [30.48 m] if using the 3/8" [9.53 mm] liquid line. The total horizontal run if using 1/2" [12.7 mm] liquid line size will be 150 feet [45.72 m].
- Do not exceed vertical separation as indicated on the chart.
- Always use the smallest liquid line possible to minimize system charge.
- No changes required for flow-check pistons or expansion valve coils.

Suction Line Length/Size versus Capacity Multiplier								
RAMB-		018	024	030	036	042	048	060
Unit Suction Line Connection Size		3/4" [19.05 mm] I.D. Sweat	7/8" [22.23 mm] I.D. Sweat	1 1/8" [28.58 mm] I.D. Sweat				
Suction Line Run—Feet [m]		5/8" [15.88 mm] O.D. Optional 3/4" [19.05 mm] O.D. Standard	3/4" [19.05 mm] O.D. Optional 7/8" [22.23 mm] O.D. Standard	7/8" [22.23 mm] O.D. Optional 1 1/8" [28.58 mm] O.D. Standard				
25' [7.62]	Optional	.98	.98	—	.99	.99	.99	.99
	Standard	1.00	1.00	1.00	1.00	1.00	1.00	1.00
	Optional	1.01	1.01	1.01	1.01	1.01	1.01	1.01
50' [15.24]	Optional	.96	.96	—	.97	.97	.97	.97
	Standard	.99	.99	.99	.99	1.00	1.00	.99
	Optional	1.00	1.00	1.00	1.01	1.01	1.01	1.01
100' [30.48]	Optional	.93	.93	—	.93	.96	.96	.95
	Standard	.99	.98	.97	.98	.99	.99	.99
	Optional	1.00	.99	.99	1.00	1.00	1.00	1.00
150' [45.72]	Optional	—	—	—	—	.93	.93	.93
	Standard	.98	.97	.95	.97	.99	.99	.98
	Optional	1.00	.98	.97	.99	1.00	1.00	.99

NOTES: Capacity Multiplier x Rated Capacity = Actual Capacity.

Additional compressor oil is not required for runs up to 150 feet [45.72 m].

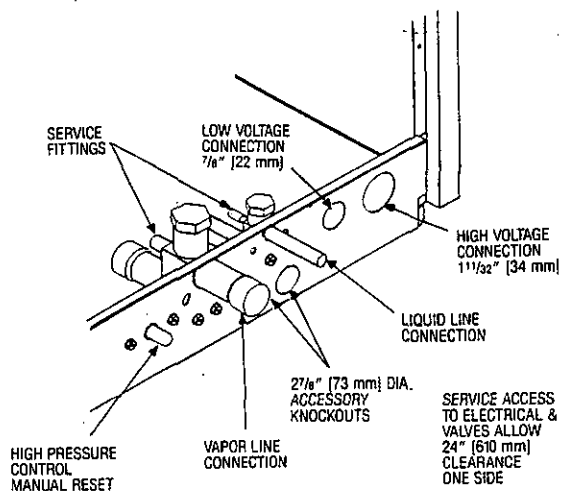
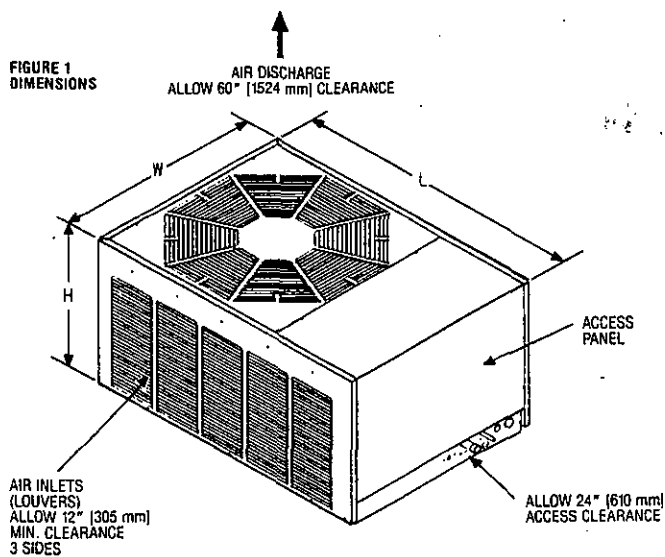
Oil traps in vertical runs are not required for any height up to 125 feet [38.10 m]. See Liquid Line chart for Vertical Separation Requirements and Limitations.

* Adapter to 1 1/8" [28.58 mm] factory supplied.

[] Designates Metric Conversions

Init Dimensions

FIGURE 1
DIMENSIONS



Model Number RAMB	Height "H" (Inches) [mm]	Length "L" (Inches) [mm]	Width "W" (Inches) [mm]
018/024	20 ³ / ₄ [527.05]	33 ¹¹ / ₁₆ [855.66]	23 ¹ / ₄ [590.55]
030	20 ³ / ₄ [527.05]	38 ¹¹ / ₁₆ [982.66]	27 ¹ / ₈ [688.98]
036/042	20 ³ / ₄ [527.05]	42 ⁹ / ₁₆ [1081.09]	31 [787.40]
048	26 ³ / ₄ [679.49]	42 ⁹ / ₁₆ [1081.09]	31 [787.40]
060	34 ³ / ₄ [882.65]	43 [1092.20]	31 [787.40]

[] Designates Metric Conversions

Before proceeding with installation, refer to installation instructions packaged with each model, as well as complying with all Federal, State, Provincial, and Local codes, regulations, and practices.

RHEEM AIR CONDITIONING DIVISION

5600 Old Greenwood Road, Fort Smith, Arkansas 72908

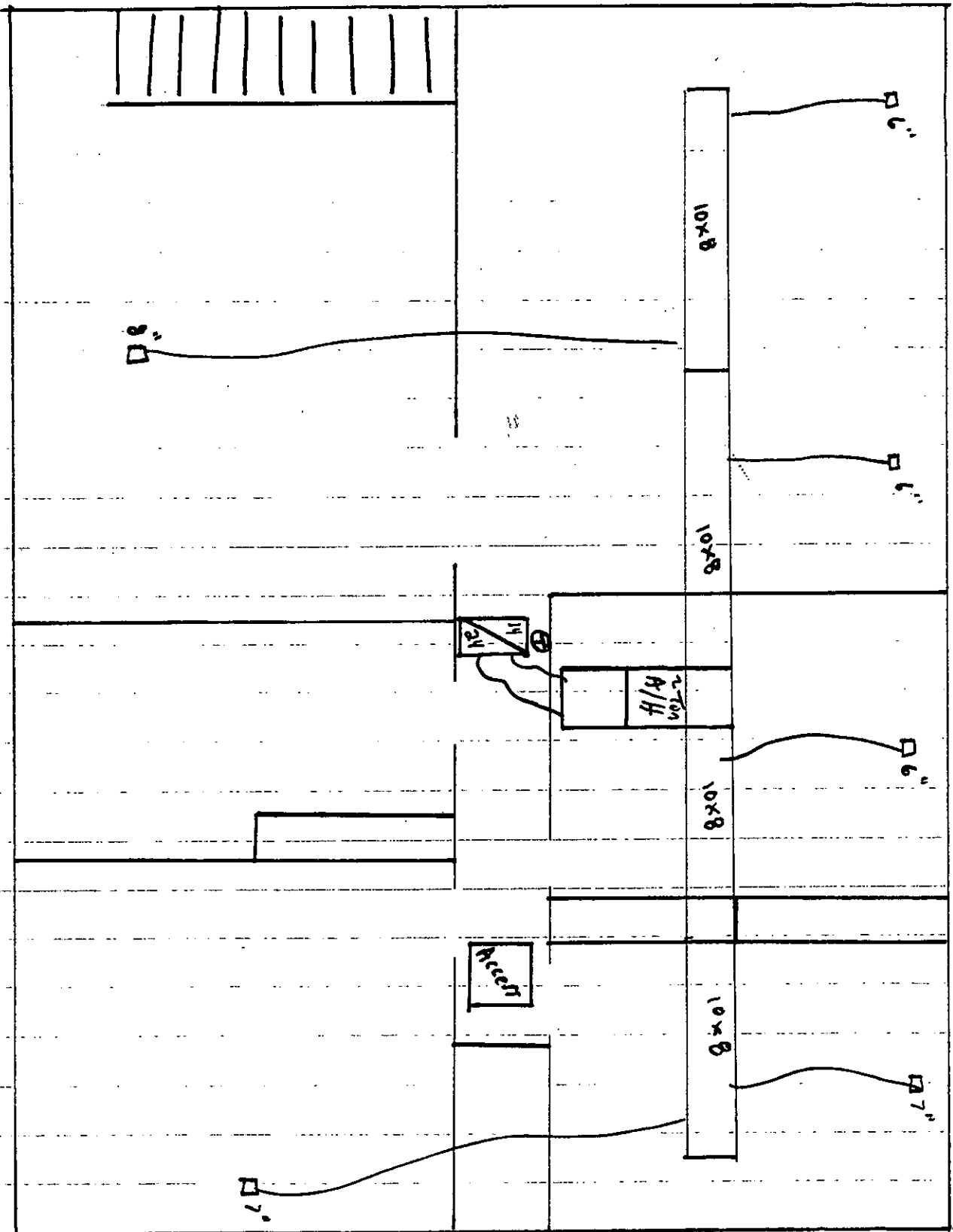


"In keeping with its policy of continuous progress and product improvement, Rheem reserves the right to make changes without notice."

Brown
1672 Folge Pond Road

BLK. 85B
Lot: 16

Overhead A/C



Township of Brick

Counter Form
(PLEASE PRINT)

Site Location: 1672 FORGE POND ROAD, BRICK NJ 08724
Block: 838 Lot: 16
Owner's Name: DESMOND BROWN
Owner's Mailing Address: SAME AS ABOVE
Phone: [REDACTED]

BUILDING

Contractor: BRICK TWP HEATING & A/C
Address: 465 BRICK BLVD
BRICK NJ 08723
Phone#: 732-477-3300
Lis #
Federal Emp # or SSN 21-0703175

Technical Data

Description of Work:

INSTALLATION OF AN OVERHEAD CENTRAL
A/C SYSTEM. - DUCTWORK IN ATTIC SPACE.

Type of Work

☐ New Building ☐ Siding
☐ Addition ☐ Fence
☒ Alteration (DUCTWORK) ☐ Pool
☐ Roofing ☐ Demolition
☐ Asbestos Abatement ☐ Sign sq ft

Building Characteristics

Use Group Present: Proposed: ☒
No of Stories:
Height of Structure:
Area of the largest floor:
Area of New Building:
Volume of Structure:
Total Land Disturbed:
Cost of Alteration: \$300.00
Cost of New Building:
Total Cost of Building Work: \$300.00

Signature: Craig L
Please Print Name CRAIG LAW

ELECTRICAL

Contractor: EUREKA ELECTRIC SERVICE
Address: PO BOX 4075
BRICK NJ 08723
Phone#: 255-2822
Lis #: 4872
Federal Emp # or SSN 221814013

Technical Data

Item	Quantity
Lighting Fixtures	1
Receptacles	1
Switches	
Detectors	
Light Poles	
Motors w/ Fract. HP	
Emergency & Exit Lights	
Communication Points	
Alarm Devices/FAC Panel	
Total	

Pool
Spa/Hot Tub/Storable Pool
Electric Range KW
Oven/Surface Unit KW
Electric Water Heater KW
Electric Dryer KW
Dishwasher KW
Garbage Disposal HP
A/C Unit - Central Air (1) 2 TON KW
Space Heater/Air Handler (1) 2 TON KW
Baseboard Heating KW
Motors 1+ HP
Transformer/Generator KW
Light Stander AMP
Service AMP
Subpanel AMP
Motor Control Center AMP
Sign/Outline Light KW
Furnace
Steam Boiler
Other:

Estimated Cost of Electrical Work: \$400.00

Signature: [Signature]
Please Print Name Robert K. Schillaci

CONTRACTOR'S SEAL

Counter Form
PLEASE PRINT

PLUMBING

Contractor: BRICK TWP HEATING & A/C
Address: 465 BRICK BLVD
BRICK NJ 08723
Phone #: 732-477-3300
Lis #: _____
Federal Emp # or SSN 21-0703175

Technical Data

Fixtures	Quantity
Water Closets	_____
Urinals/Bidets	_____
Bath Tub	_____
Lavatory	_____
Shower	_____
Floor Drain	_____
Sink	_____
Dishwasher	_____
Drinking Fountain	_____
Washing Machine	_____
Hose Bib	_____
Gas Piping	_____
Fuel Oil Piping	_____
Water Heater	_____
Steam Boiler	_____
Hot Water Boiler	_____
Sewer Pump	_____
Interceptor/Separator	_____
Backflow Preventer	_____
Greasetrap	_____
Water Cooled A/C or Refrigerator Unit	<u>(1) 2 TON</u>
Septic Tank Closure	_____
Sewer Service Connection	_____
Water Service Connection	_____
Active Solar System	_____
Auxiliary Meter	_____
Sprinkler Heads	_____
Sump Pump	_____
Other:	_____

Estimated Cost of Plumbing Work \$100.00

Signature: Craig L

Please Print Name CRIG LAGW

CONTRACTOR'S SEAL

FIRE

Contractor: _____
Address: _____
Phone #: _____
Lis #: _____
Federal Emp # or SSN _____

Technical Data

Description of Work:

Heating Type: Gas Oil Electric Solar
Heating System is New Existing
Location of Furnace/Boiler: _____

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

Item	Quantity
Flammable Storage Tanks	_____ capacity _____ fuel
Combustible Storage Tanks	_____ capacity _____ fuel
LPG Storage Tanks	_____ capacity _____ fuel
Wet Sprinkler Heads	_____
Dry Sprinkler Heads	_____
Total	_____
Smoke Detectors	_____
Heat Detectors	_____
Total	_____
Stand Pipes	_____
Kitchen Hood Exhaust System	_____
Pre-Engineered Systems:	
CO2 Suppression	_____
Halon Suppression	_____
Foam Suppression	_____
Dry Chemical	_____
Wet Chemical	_____

Gas/ Oil Fired Appliances:
Number of gas/oil fired appliances _____

Furnace _____
Gas/Wood Fireplace _____
Gas Logs _____
Wood Burning Stove _____
Other: _____

Estimated Cost of Fire Work _____

Signature: _____

Print Name: _____