BLOCK 833 LOT 31 QUALIFICATION CODE _____ ADDRESS (SITE) 1647 Tilford Blvd PERMIT NO. 16-2488

Brick

CONSTRUCTION PERMIT APPLICATION

NEW JERSEY UNIFORM CONSTRUCTION CODE

C-16-003054

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

I. IDENTIFICATION

1. Propsed Work Site at: 1647 Tilford Blvd
2. Name of Owner in Fee: Richard Williamson Tel [redacted]
   Address Same (street) (municipality) (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: Point Bay Fuel Tel. (732) 349-5059
   Address 71 Irons St Toms River
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 80-0963471 FAX: (732) 349-1788
5. Architect or Engineer _____ Tel. ( ) _____
   Address _____ Contact _____
6. Responsible Person in Charge once Work has Begun Al Kania
   Tel. (732) 349-5059 FAX: (732) 349-1788

Dept ajc ✓

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$	150 ✓	
2. Electrical		150 ✓	
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. State Permit Surcharge Fee		16 -	
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$	316 -	

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. 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	

II. PROPOSED WORK

OPTIONAL (for office use only)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
1. ☐ Minor Work									
2. ☐ New Building									
3. ☐ Addition		6/27/16							
4. ☐ a. Repair									
☐ b. Alteration									
☐ c. Renovation									
☐ d. Reconstruction									
5. ☐ Fire Protection									
6. ☒ Plumbing ☐ Mechanical	8000 -				7/7/16				
7. ☒ Electrical	300 -				6/30/16				
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	8300 -								

III. DO YOU WANT: (optional)

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

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1) IBC 2009 NJ
2. ☐ Multi-Family (R-2) IBC 2009 NJ
3. ☐ Two-Family (R-3) IBC 2009 NJ
4. ☐ Two-Family (R-5) IRC 2009 NJ
5. ☐ One-Family (R-3) IBC 2009 NJ
6. ☐ One-Family (R-5) IRC 2009 NJ

No. of dwelling units:
Before Construction _____
After Construction _____
Net Gain or Loss _____

B. NON-RESIDENTIAL

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 08/24/2016
Control Number C-16-003054
Permit Number 16-2488
Permit Issue Date 07/19/2016
Certificate Number 16-2488

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1647 TILFORD BLVD Brick Township, NJ Block: 833 Lot: 31 Qual:

Owner in Fee: WILLIAMSON, RICHARD & DORIS

Owner Address: 1647 TILFORD BLVD. BRICK NJ 08724

Telephone: [redacted]

Contractor POINT BAY FUEL INC

Address 71 IRONS ST TOMS RIVER NJ 08753-

Telephone: (732) 349-5059 Fax: (732) 349-1788

License Number or Builders Registration Number: 13VH01149900 Federal Emp. Number: 22-1817388

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: REPLACEMENT A/C

Certificate Comments:

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

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

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

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

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

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

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

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

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

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

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 08/24/2016

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.

(✓) Check if contractor.

Agent Name Point Bay Fuel

Address 71 Irons St

Toms River

Telephone (732 349-5059

Signature _____

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received Control # 7/19/16

Date Issued Permit # 16-2488

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

Block 833 Lot 31 Qualification Code

Work Site Location 1647 TILFORD BLVD
BRICK NJ

Owner in Fee: RICHARD WILLIAMSON

Tel. [redacted] e-mail

Address SAME
street municipality

Contractor: POINT BAY FUEL Tel. (732) 349-5059
zip code

Address 71 IRONS STREET e-mail
TOMS RIVER, NJ 08753

Contractor License No. Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason 13VHO1149900

Federal Emp. ID No. 800963471 FAX: (732) 349-1788

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 $ 8,000

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL for PERMIT
Date: 7-21-16
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [ ] CA
Date: 8-24-16
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			8-23-16	

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here: Al Kania

Print name here: AL KANIA

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
REPLACE CONDENSER & AIR HANDLER

QTY.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Closet	$
	Urinal/Bidet	
	Bath Tub	
	Lavatory	
	Shower	
	Floor Drain	
	Sink	
	Dishwasher	
	Drinking Fountain	
	Washing Machine	
	Hose Bibb	
	Water Heater	
	Fuel Oil Piping	
	Gas Piping	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
1	Other REPL AC	

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

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

CONSTRUCTION PERMIT

Date Issued 7/19/16
Control # C-16-003054
Permit # 16-2488

IDENTIFICATION Block: 833 Lot: 31 Qualifier
Work Site Location: 1647 TILFORD BLVD Brick Township, NJ
Owner in Fee WILLIAMSON, RICHARD & DORIS
1647 TILFORD BLVD. BRICK NJ 08724
Telephone: [redacted]

Contractor POINT BAY FUEL INC
Address 71 IRONS ST TOMS RIVER NJ 08753-
Telephone: (732) 349-5059
Lic. No. or Bldrs. Reg. No. 13VH01149900 13VH01149900
Federal Employee. No. 22-1817388

Is hereby granted permission to perform the following work:

- ☐ BUILDING
- ☑ PLUMBING
- ☐ LEAD HAZARD ABATEMENT
- ☑ ELECTRICAL
- ☐ FIRE PROTECTION
- ☐ DEMOLITION
- ☐ ELEVATOR DEVICES
- ☐ ASBESTOS ABATEMENT (Subchapter 8 only)
- ☐ OTHER

DESCRIPTION OF WORK:
REPLACEMENT A/C

Note: If constuction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.
Estimated Cost of Work $8,300

D. Neumann Jr. 7/20
Construction Official

7/8/16
Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$150
Plumbing	$150
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$16
CO Fee	
Other	$0
Total	$316
Check No.	3539
Cash	$0
Credit	$0
Collected By	CW

07/19/16 11:17AM 001558#2177
XX03 SERV.003
#2434 GOLD - APPLICANT
ELECTRIC $150.00
PLUMBING $150.00
DCA $16.00
CHECK $316.00

U.C.C. F170
equiv (rev 1/04)
1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR

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.

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 7/19/16
Control #
Date Issued
Permit # 16-2488

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

Block 833 Lot 31 Qualification Code

Work Site Location 1647 Tilford Blvd Brick

Owner in Fee: Richard Williamson

Tel. [redacted] e-mail

Address Same (street / municipality / zip code)

Contractor: R & M Electrical Contracting Tel. (732) 473-9541

Address 825 OCEAN AVE e-mail

BEAHCWOOD NJ 08722

Contractor License No. 15087 Exp. Date

Home Improvement Contractor Registration No. or Exemption Reason

Federal Emp. ID No. FAX:

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 300 —

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[Y] Electric Plans Approved SPECS.

Date: 6/30/16 Approved by: AR

Joint Plan Review Required:

[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date: 6/30/16

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [Y] CA

Date: 8/23/16

Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other A/C air Handler			8-23-16/MV	
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

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: Richard J Rutkowski

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Replace condenser + air handler

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
0		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
1		KW Central A/C Unit	
1		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 $

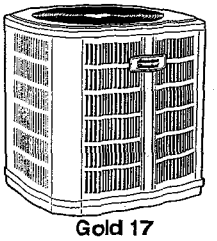
U.C.C. F120 (rev. 11/09)
Internet version

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

Williamson

American Standard®
HEATING & AIR CONDITIONING

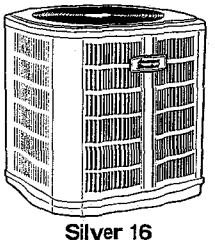
Split System Cooling
Single Phase – 1½-5 Tons



Gold 17
(Two Stage)

Table SC-3-A — Gold 17 R-410A Split System Two Stage Cooling (70/100% capacity)

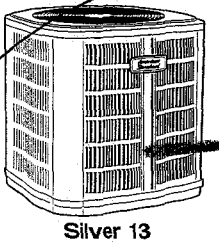
Model Number	Power Supply	Nom. Cap. Cooling (BTUH)	Uncrated Dimensions(in.) H	W	D	Shipping Weight (lbs.)	Sound** Rating	MCA*	Max. Fuse*	Line Size (in) OD Gas	OD Liq.
4A7A7024A1000B	208/230/1/60	24,000	41	37	34	276	72	18	20	5/8	3/8
4A7A7036A1000B	208/230/1/60	36,000	45	37	34	283	72	24	35	3/4	3/8
4A7A7048A1000B	208/230/1/60	48,000	45	37	34	308	73	28	45	7/8	3/8
4A7A7060A1000B	208/230/1/60	60,000	45	37	34	312	74	37	60	1 1/8	3/8



Silver 16
(Single Stage)

Table SC-3-B — Silver 16 R-410A Split System Single Stage Cooling

Model Number	Power Supply	Nom. Cap. Cooling (BTUH)	Uncrated Dimensions(in.) H	W	D	Shipping Weight (lbs.)	Sound** Rating	MCA*	Max. Fuse*	Line Size OD Gas	OD Liq.
4A7A6018J1000A	208/230/1/60	18,000	29	33	30	200	75	9	15	5/8	3/8
4A7A6024J1000A	208/230/1/60	24,000	29	33	30	201	75	9	15	3/4	3/8
4A7A6030J1000A	208/230/1/60	30,000	33	37	34	234	75	12	20	3/4	3/8
4A7A6036J1000A	208/230/1/60	36,000	37	37	34	228	75	19	30	3/4	3/8
4A7A6042J1000A	208/230/1/60	42,000	41	37	34J	272	75	23	40	7/8	3/8
4A7A6049J1000B	208/230/1/60	48,000	45	37	34	304	74	26	45	7/8	3/8
4A7A6061J1000A	208/230/1/60	60,000	45	37	34	317	75	32	50	1 1/8	3/8



Silver 13
(Single Stage)

Table SC-3-D— Silver 13 R-410A Split System Single Stage Cooling

Model Number	Power Supply	Nom. Cap. Cooling (BTUH)	Uncrated Dimensions(in.) H	W	D	Shipping Weight (lbs.)	Sound** Rating	MCA*	Max. Fuse*	Line Size OD Gas	OD Liq.
4A7A3018H1000N②	208/230/1/60	17,000	29	29	26	153	72	12	20	5/8	3/8
4A7A3024H1000N②	208/230/1/60	23,000	29	29	26	150	74	18	30	5/8	3/8
4A7A3030G1000N②	208/230/1/60	28,500	29	33	30	180	71	18	30	3/4	3/8
4A7A3036G1000N②	208/230/1/60	34,500	33	33	30	197	74	22	35	3/4	3/8
4A7A3042D1000N②	208/230/1/60	40,500	29	37	34	228	74	26	45	3/4	3/8
4A7A3048D1000N②	208/230/1/60	46,500	29	37	34	235	75	28	50	7/8	3/8
4A7A3060D1000N②	208/230/1/60	58,500	37	37	34	261	75	35	60	7/8	3/8

① Models are not legal for installation in California, Nevada, New Mexico and Arizona. All other models are legal for installation in all US zones and states.
② 13 SEER AC equipment manufactured after 1/1/15 can only be installed in the North Zone.
* Information subject to change. Please confirm with current Product Data/Service Facts for current factory production.
** Rated in accordance with AHRI Standard 270-2008 (Min/Max when applicable).

For complete equipment / combination selections, installation instructions and warranty information, please refer to Product Data/Ratings and/or Installers Guides and Limited Warranty Handbooks.

Effective 1/1/15
14-1011-32

Richard Williamson
1647 Tilford Blvd
Block- 833
Lot- 31

FOR REPLACEMENT FURNACE/BOILER

OLD BTU --- INPUT_____ OUTPUT_____

NEW BTU --- INPUT_____ OUTPUT_____

A/C REPLACEMENT

OLD UNIT 2 TON

NEW UNIT 2 TON

AND/OR

HEAT LOSS/HEAT GAIN

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

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

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

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

********CHIMNEY CERTIFICATION**

(CANNOT BE CERTIFICATION BY HOMEOWNER)

THIS DOCUMENT IS PRINTED ON WATERMARKED PAPER, WITH A MULTI-COLORED BACKGROUND AND MULTIPLE SECURITY FEATURES. PLEASE VERIFY AUTHENTICITY.

NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE

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

THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs

HAS REGISTERED

Point Bay Fuel Company Inc.
Timothy Bergin
71 Irons Street
Toms River NJ 08753

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

03/04/2016 TO 03/31/2017
VALID

13VH01149900
LICENSE/REGISTRATION/CERTIFICATION #

Signature of Licensee/Registrant/Certificate Holder

ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Division of Consumer Affairs
HAS REGISTERED
Point Bay Fuel Company Inc.
Home Improvement Contractor
NOT AN ELECTRICIAN'S OR PLUMBER'S LICENSE
03/04/2016 TO 03/31/2017
13VH01149900

PLEASE DETACH HERE

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

PLEASE DETACH HERE

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Exam. of Electrical Contractors
HAS LICENSED
R&M ELECTRICAL CONTRACTING
Electrical Business Permit

03/19/2015 TO 03/31/2018 _____
VALID SIGNATURE

34EB01508700 _____
License/Registration/Certificate # ACTING DIRECTOR

New Jersey Office of the Attorney General
Division of Consumer Affairs
THIS IS TO CERTIFY THAT THE
Board of Exam. of Electrical Contractors
HAS LICENSED
Richard J. Rutkowski
Electrical Contractor

03/19/2015 TO 03/31/2018 _____
VALID SIGNATURE

34EI01508700 _____
License/Registration/Certificate # ACTING DIRECTOR