BLOCK 825 LOT 20 QUALIFICATION CODE ADDRESS (SITE) PERMIT NO. C 09-003844 E 09-3307

CONSTRUCTION PERMIT APPLICATION

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

I. IDENTIFICATION

1. Property Site at: 1622 FORGE POND ROAD BRICK NJ
2. Name of Owner in Fee: Joe Mellino
   Tel [redacted] e-mail
   Address 1622 Forge Pond Road (street) Brick NJ. (municipality) 08723 (zip code)
3. Ownership in Fee: Public ____ Private ✓
4. Principal Contractor: Homeowner Tel. ( ) ____
   Address ____ e-mail ____
   License No. OR, if new home, Builder Reg. No. ____ Exp. Date ____
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): ____
   Federal Emp. ID No. ____ FAX: ( ) ____
5. Architect or Engineer ____ Contact ____
   Address ____ e-mail ____
   Tel. ( ) ____ FAX: ( ) ____
6. Responsible Person in Charge once Work has Begun ____
   Tel. ( ) ____ FAX: ( ) ____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical		45	
3. Plumbing		112 ✓	60 ✓
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee		1-	1-
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$	156-	67-

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									
☑ Electrical		MD	8/26/09		8-27-9	AS			
☑ Plumbing				8-27-09	13.05.12 PT	JW	9-10-09		JW
☑ Fire Protection									
☐ Elevator									
TOTAL COST									

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL *(primary use)*
1. State Specific Use: ____
2. Use Group, Proposed: ____
3. Change in Use Group, Indicate Present:
4. No. of dwelling units: *Total Units* *Income-restricted*
   Gained, Sale ____
   Gained, Rental ____
   Lost, Sale ____
   Lost, Rental ____

B. NON-RESIDENTIAL *(primary use)*
1. State Specific Use: ____
2. Use Group, Proposed: ____
3. Change in Use Group, Indicate Present:

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

D. Construct. Classification: Present ____ Proposed ____

III. PLAN REVIEW (optional)

DO YOU WANT:
1. ☐ Partial Releases
2. ☐ Prototype Processing

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

1. ☐ Elevators/Escalators/Lifts/ Dumbwaiters/Moving Walks
2. ☐ High Pressure Boilers
3. ☐ Pressure Vessels
4. ☐ Refrigeration Systems
5. ☐ Cross-Connections/Backflow Preventers
6. ☐ Hazardous Uses/Places of Assembly
7. ☐ Sprinklers
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks
10. ☐ Swimming Pools, Spas and Hot Tubs
11. ☐ LPGas Tanks

Called 9/14/09

U.C.C. F100-1 (rev. 12/07)

FOR OFFICE USE ONLY

Constituent Contact Report

Date	Comments	Initials
3/11/18	Bob Weatherford said they can do change of contractor	MC

☐ Zoning Application deemed complete Initialed: _____ Date: _____

☐ Zoning Application approved Initialed: _____ Date: _____

☐ Zoning permit updates:

_____

_____

_____

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

C. ( ) I further certify that I will perform or supervise the following work:
C.1. ( ) Building C.2. ( ) Fire Protection

I further certify that I will perform the following work:
C.3. ( ) Electrical C.4. ( ) Plumbing

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

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

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

Signature _____ Date 8/25/03

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 _____

Address _____

_____

Telephone (_____) _____

Signature _____

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

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued	10/26/2012
Control Number	C-09-003044
Permit Number	09-2307
Permit Issue Date	9/18/2009
Certificate Number	09-2307

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1622 FORGE POND RD Brick Township, NJ Block: 825 Lot: 20 Qual:

Owner in Fee: MELLINO, JOSEPH

Owner Address: 14 PINEWOOD DRIVE BRICK NJ 08723

Telephone: [redacted]

Contractor MELLINO, JOSEPH

Address 14 PINEWOOD DRIVE BRICK NJ 08723

Telephone: [redacted] Fax:

License Number or Builders Registration Number: Federal Emp. Number:

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: NEW HOT WATER HEATER, REPLACEMENT BOILER DIRECT REPLACEMENT

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: 10/26/2012 U.C.C. F260 (rev. 08/05)

PERMIT UPDATE

Date Update Issued 3/9/12
Control # C-12-000663
Permit # 09-2307+A

IDENTIFICATION Block: 825 Lot: 20 Qualifier
Work Site Location: 1622 FORGE POND RD Brick Township, NJ
Contractor MELLINO, JOSEPH
Address 14 PINEWOOD DRIVE BRICK NJ 08723
Owner in Fee MELLINO, JOSEPH
14 PINEWOOD DRIVE BRICK NJ 08723
Telephone: [redacted]
Telephone: [redacted]
Lic. No. of Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
BACKFLOW PREVENTER/LAWN SPRINKLER Change of contractor and update

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 $4,350

Construction Official Date

PAYMENTS (Office Use Only)

Building	$0
Electrical	$0
Plumbing	$60
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$7
CO Fee	
Other	$0
Total	$67
Check No.	
Cash	67 — $0
Credit	$0
Collected By	

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

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.

☑ 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.

CONSTRUCTION PERMIT

Date Issued 9/18/09
Control # C-09-003044
Permit # 09-2307

IDENTIFICATION Block: 825 Lot: 20 Qualifier
Work Site Location: 1622 FORGE POND RD Brick Township, NJ
Owner in Fee MELLINO, JOSEPH
14 PINEWOOD DRIVE BRICK NJ 08723
Telephone: [redacted]

Contractor MELLINO, JOSEPH
Address 14 PINEWOOD DRIVE BRICK NJ 08723
Telephone [redacted]
Lic. No. or Bldrs. Reg. No.
Federal Employee. No.

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
NEW HOT WATER HEATER, REPLACEMENT BOILER DIRECT REPLACEMENT

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 $450

Construction Official
Date

PAYMENTS (Office Use Only)	
Building	$0
Electrical	$45
Plumbing	$110
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$1
CO Fee	
Other	$0
Total	$156
Check No.	
Cash	$0
Credit	$0
Collected By	

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

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.

☐ 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 9/18/09
Control #
Date Issued
Permit # 09-2307

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

Block 825 Lot 20 Qualification Code
Work Site Location 1622 FORGE POND ROAD BRICK NEW JERSEY 08723
Owner in Fee: JOE MOLLINS
[redacted] e-mail
Address 1622 Forge Pond Rd Brick New Jersey 08723 (street, municipality, zip code)
Contractor: Anthony Mellino Tel. (732) [redacted]
Address 508 12 Ave Belmar NJ e-mail [redacted]
Contractor License No. 12516 Exp. Date 6/30/2014
Home Improvement Contractor Registration No. or Exemption Reason (if applicable):
Federal Emp. ID No. FAX: ( )

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 $ 100 00

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[✓] Plumbing Plans Approved
Date: 9-10-09 Approved by: [illegible]
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 10-29-12
Approved by: [illegible]

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping	3/12/12		03.13.12	PA
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			10.23.12	PA

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

[✓] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Installing Gas Fire Boiler and Hot Water Heat And gas pipe

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	
✓ 2	Gas Piping	
	LPGas Tank	
	Steam Boiler	
✓ 1	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Other	

1000,000 BTU Boiler

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

U.C.C. F130 (rev. 12/07) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

Update

Change of Contractor

Date Received 3/9/12
Control #

Date Issued
Permit # 09-2307+A

PLUMBING SUBCODE
TECHNICAL SECTION

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

Block 825 Lot 20 Qualification Code

Work Site Location 1622 Forge Pond Rd
Brick NJ 08724

Owner in Fee: Michael + Melinda Moich

Te [redacted] e-mail

Address 1622 Forge Pond Rd (street) Brick NJ (municipality) 08724 (zip code)

Contractor: Owner - Michael Moich Tel. ( )

Address 1622 Forge Pond Rd e-mail
Brick NJ 08724

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed

Building Sewer Size Public Sewer yes Private Septic

Water Service Size Public Water yes Private Well

Est. Cost of Plumbing Work $ 4350

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[X] Plumbing Plans Approved
Date: 03-05-12 Approved by: PA
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date: 3-6-12
Approved by: 3

SUBCODE APPROVAL for CERTIFICATE
[ ] CO [ ] CCO [X] CA
Date: 10-25-12
Approved by: WBW

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping			03.13.12	PA
LPGas Tank				
Fuel Oil Piping				
Solar				
TCO				
Final			10.23.12	PA

C. CERTIFICATION IN LIEU OF OATH

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

Applicant sign/Contractor sign and seal here: Michael Moich

Print name here: Michael Moich

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

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	
1	Backflow Preventer - FOR BOILER	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

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

U.C.C. F130 (rev. 11/09) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

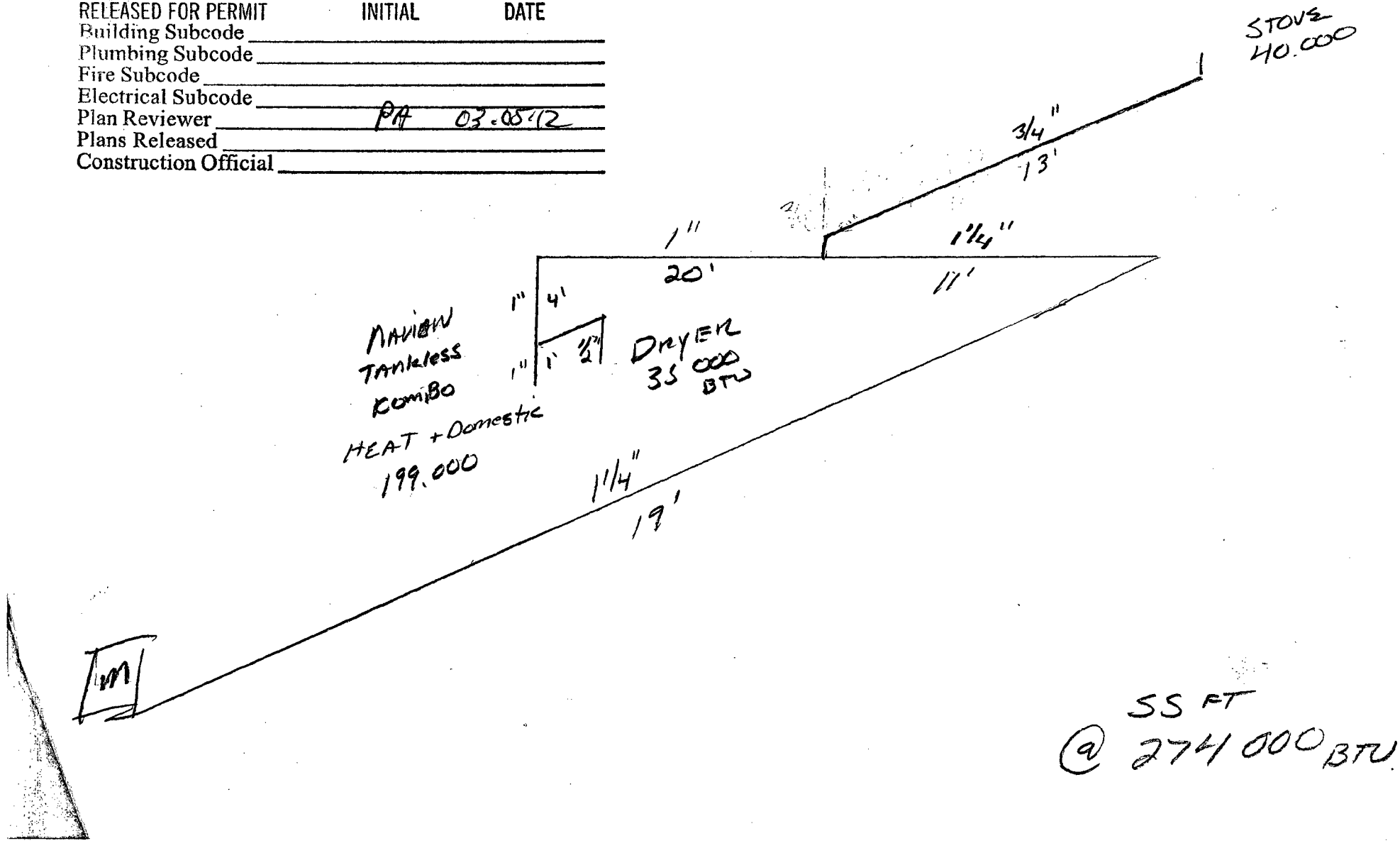
Lot # 20

Block # 825

1 inch

TOWNSHIP

RELEASED FOR PERMIT	INITIAL	DATE
Building Subcode		
Plumbing Subcode		
Fire Subcode		
Electrical Subcode		
Plan Reviewer	PA	03.05.12
Plans Released		
Construction Official		



ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received Control # 9/18/09

Date Issued Permit # 09-2307

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

Block 825 Lot 20 Qualification Code

Work Site Location 1622 FORGE POND ROAD
BRICK NEW JERSEY

Owner in Fee JOE MELLINO

Tel. [redacted] e-mail

Address 1622 Forge Pond Rd Brick N.J. 08723
street municipality zip code

Contractor: Green Electrical Enterprises Tel. (732) 903-6485

Address 40 Pinewood Dr. e-mail
BRICK TWP. N.J. 08724

Contractor License No. 116026 Exp. Date

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

Federal Emp. ID No. 260625987 FAX: (732) 785-8380

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed New furnance

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

Building Occupied as Utility Co. JCPL

Est. Cost of Elec. Work $ $350.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[✓] No Plans Required 8-27-09 [illegible]

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Electric Plans Approved

Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date: 10-25-12

Approved by: JJ

INSPECTIONS Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final			10-23-12	JJ
Barrier-Free				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: Install furnance disconnect switch w/ Red boiler cover.

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

U.C.C. F120 (rev. 12/07) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 9/18/09
Control #
Date Issued
Permit # 09-2307

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

Block 825 Lot 20 Qualification Code

Work Site Location 1622 FORGE POND ROAD
BRICK NEW JERSEY 08723

[redacted] e-mail

Address 1622 Forge Pond Rd Brick New Jersey 08723
street municipality

Contractor: Anthony Mellino Tel. [redacted]

Address 58 12 Ave Belmar NJ e-mail

Contractor License No. 12516 Exp. Date 6/30/05 6/30/2011

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

Federal Emp. ID No. FAX: ( )

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 $ 100

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[✓] Plumbing Plans Approved
Date: 9-10-09 Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

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's Signature/Contractor's Seal and Signature

[✓] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
INSTALLING GAS FIRE BOILER AND HOT WATER HEAT AND GAS PIPE

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	
2	Gas Piping	
	LPGas Tank	
	Steam Boiler	
1	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Other	

100,000 BTU Boiler

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

U.C.C. F130 (rev. 12/07) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 9/18/09
Control #
Date Issued
Permit # 09-2307

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

Block 825 Lot 20 Qualification Code

Work Site Location 1622 FORGE POND ROAD BRICK NEW JERSEY 08723

Owner in Fee: Joe Mellino

Tel. ([redacted] e-mail

Address 1622 Forge Pond Rd Brick New Jersey 08723
street municipality zip code

Contractor: Anthony Mellino Tel. (732) [redacted]

Address 58 12 Ave Belmar e-mail

Contractor License No. 12516 Exp. Date 6/30/09 4/30/2011

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

Federal Emp. ID No. FAX: ( )

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 $ 100

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
[ ] Partial -Underslab Utilities Approved
Date: Approved by:
[✓] Plumbing Plans Approved
Date: 10-05 Approved by:
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

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's Signature/Contractor's Seal and Signature

[✓] Licensed Plumbing Contractor [ ] Exempt Applicant

ANTHONY MELLINO STATE OF NEW JERSEY LICENSED MASTER PLUMBER 12516

D. TECHNICAL SITE DATA

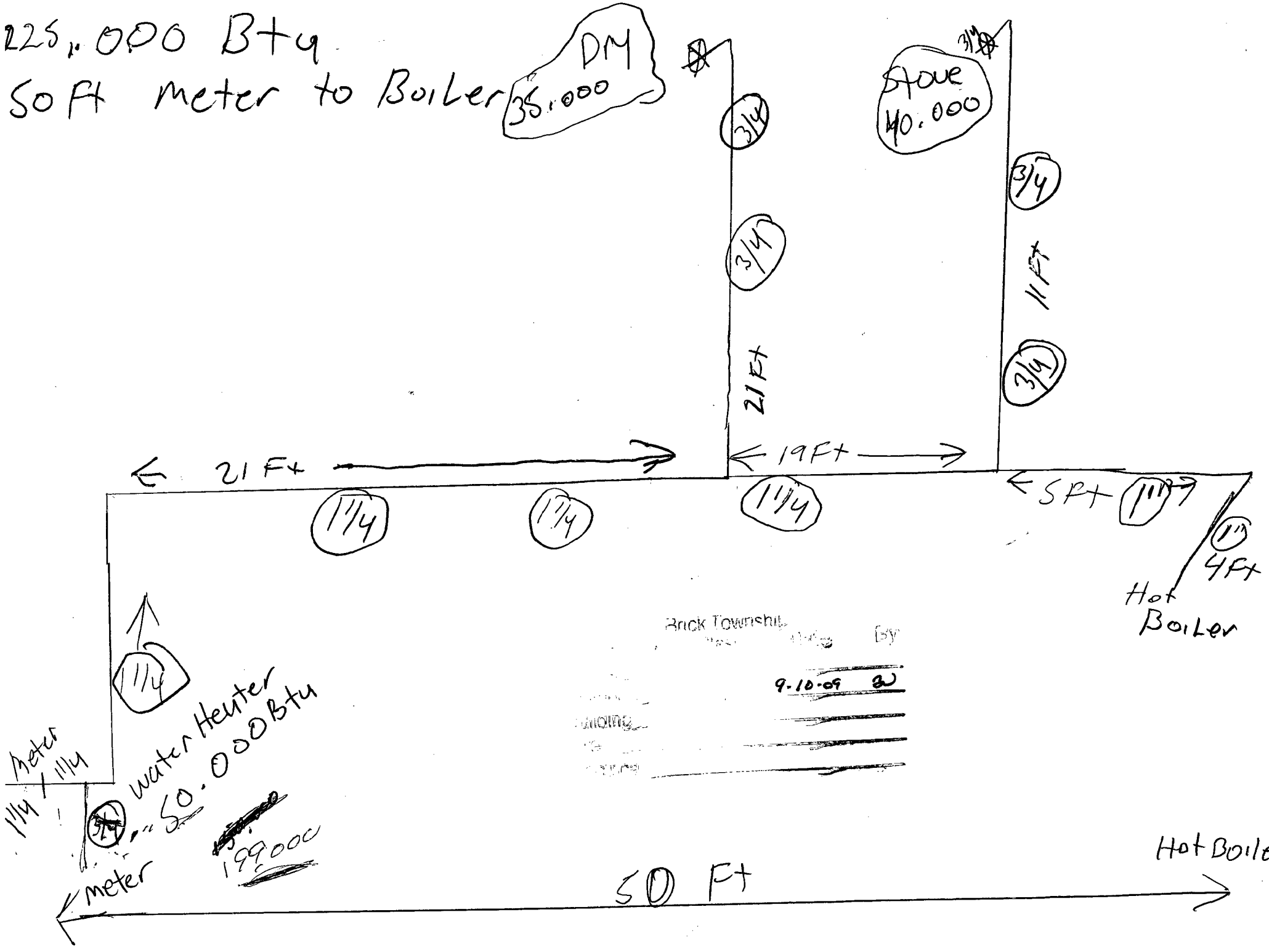
DESCRIPTION OF WORK
Installing Gas Fire Boiler and Hot Water Heat and gas pipe

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	
✓ 2	Gas Piping	
	LPGas Tank	
	Steam Boiler	
✓ 1	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Other	

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

Rinnai 270 Color

225,000 Btu
50 Ft meter to Boiler



Brick Township
By
9-10-09

Navien Condensing

Combi Gas Boiler / Water Heater

Qualifies For Federal Tax Credit

Save 30% of the cost, up to $1,500!

ENERGY STAR PARTNER

An Ideal Green Solution for Domestic and Hydronic Heating

The Ultimate in Energy Efficiency with Precision Technology

KD Navien Navien America Inc.

°T-CREATOR Navien

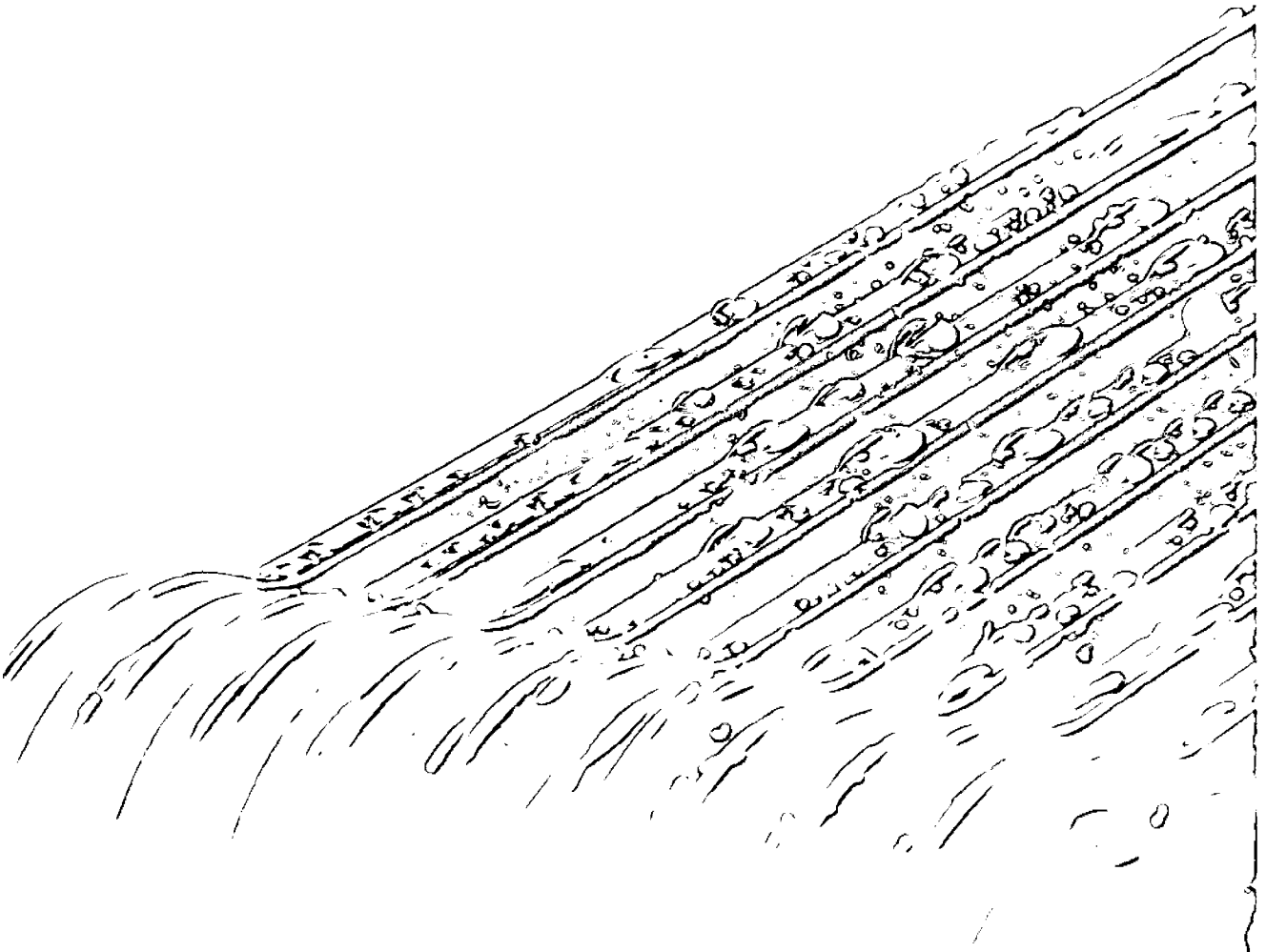
Combi Gas Boiler / Water Heater

Navien Condensing

Navien's Condensing Technology

To help explain "condensing technology," imagine the condensation on a glass of ice water. This condensation is created inside Navien's condensing heat exchanger (secondary heat exchanger) from the incoming cold water cooling the hot gases inside the unit. Navien's state-of-the-art, stainless steel condensing heat exchanger then traps this condensation and uses it, making the whole process incredibly efficient and economical.

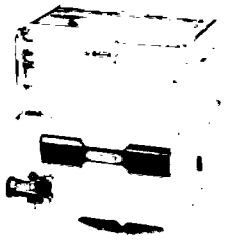
This condensation (or vapors and gases) would normally escape through the vents in a conventional water heater. But with Navien's cutting-edge technology, our Combi Water Heaters reuse the condensation, providing you with the most efficient and economical Combi Water Heater on the market today.



Navien's Condensing Combi Gas Boiler / Water Heater

An Ideal Green Solution for Domestic and Hydronic

Stainless Steel Heat Exchanger

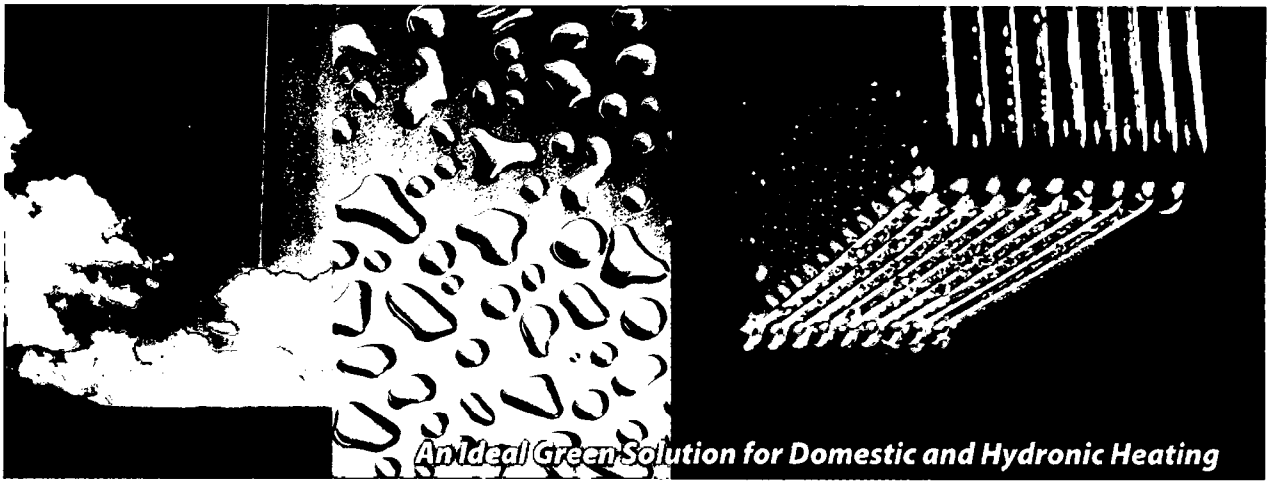


Navien's fin-type stainless steel heat exchanger, stainless steel condensing heat exchanger and premixed burner is what makes this unit so unique.

Ideal for domestic water heating and space-heating applications, such as in-floor radiant heating, base-board heating, and fan assistance air handler heating applications, the Condensing Combination Water Heater from Navien has a BTU input of up to 199,000 to fit any project.

Navien Condensing Combi Gas Boiler / Water Heater

Why Choose Navien?



Superb Condensing Efficiency & PVC Venting

Navien's Condensing Combi Water Heater is equipped with dual stainless steel heat exchangers, making it 98% efficient.
Its PVC venting also lowers the cost of installation and simplifies the process significantly. PVC is inexpensive, durable and easy to assemble, but installers and contractors will also appreciate the Combi's ability to vent up to 100 feet with a maximum of six elbows*.

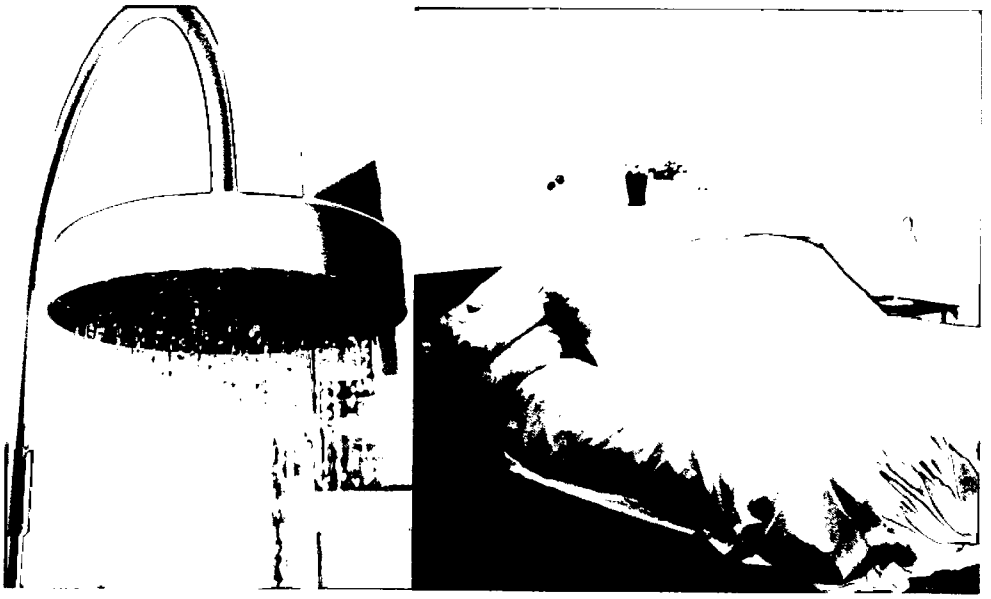
** Each elbow deduct 5' off of venting length*

Where Technology Meets Ecology, Combination Water Heater

Navien's Condensing Combi Water Heaters are the ideal solution for those customers who need both domestic hot water and a space heating application. Unlike conventional boilers, Navien's Combi Water Heater heats water only when needed, making it environmentally sound as well as cost efficient.

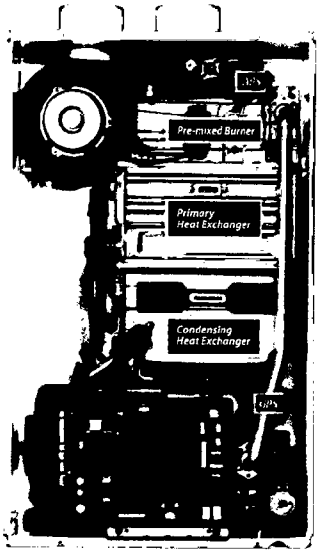
Highest Volume of Water, Cascade System

Navien's Combi Water Heater is more than capable of supplying hot water on demand and consistently due to the unit's distinctive technology, including its multi-temperature sensor, water-flow sensor and sensitive auto-burner control.
When combined with Navien's Condensing 98% Tankless Water Heater, larger families can receive ample volumes of hot water and both units will run on demand, saving energy and money.



Extended Life, Stainless Steel Heat Exchanger

Stainless steel for the Combi's integrated primary and secondary heat exchangers prevents corrosion and ensures a longer lifespan over copper parts.
Stainless steel components also maintain consistency, even during long periods of use, and aid in efficiency by capturing as much condensation as possible.
Hydronic heating is made possible thanks to the stainless steel's capacity to keep temperatures low.

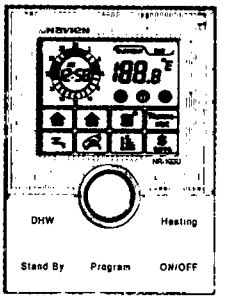


Eco-Friendly, Eco Pre-mixed Burner

High grade stainless steel burner uses pre-mixed air and gas ratio providng a 10% to 100% firing rate.
The Eco Pre-mixed Burner generates at least 20% less CO_2 and about 75% less harmful air pollutants such as NOx than other conventional water heaters.

Diverse Features, Remote Control

- Aesthetic Appearance Suitable for Any Household's Interior Design
- High-Precision Water Temperature Control in 1°F Increment
- 24 Hour Time Scheduling for Space Heating
- Easy-to-Use Button Type Control
- Easy LED Reading



Remote controller
NR-10PU

Auto Sensing & Adaptive Heating, ASA Control System

The Combination's ASA Control System maintains a consistent, comfortable temperature throughout the home at all times, even taking into account the home's design as well as outside temperatures.

The secret to this system involves a built-in thermostat which senses even the slightest temperature changes. The Combi's space-heating application calculates the amount of heat required based on the difference between the return-water temperature and the indoor temperature, then automatically adjusts and controls the temperature accordingly.

Weather Compensation Heating, K-Factor Heating

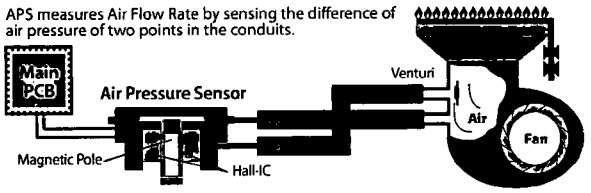
An outdoor sensor can be connected to Navien's Condensing Comi Water Heater. With this device the unit can automatically regulate the heating temperature according to changes in the temperature outdoors, allowing for precise indoor heat regardless of what the weather is doing outside.

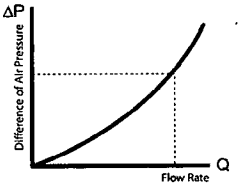
Advanced Safety Operation, Gas-Air Ratio Control

Navien's Gas-Air Ratio Control (GARC) System is incredibly resourceful because it controls not only the gas, but also air rates required for optimal combustion. The GARC System is the reason extended lines for venting are permitted on the unit; ideal combustion is maintained thanks to accurate sensing and control of the rate of air and gas needed.

This ingenious system also prevents CO poisoning from unfavorable wind conditions, maintaining stable combustion, even when gas pressure is low or erratic.

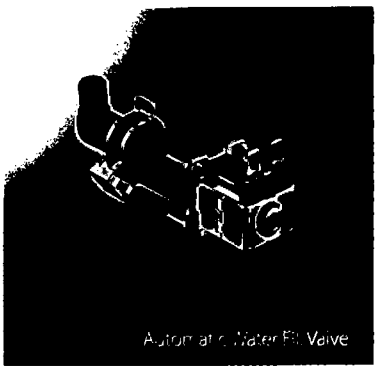
How APS Works?





Automatic Water Filling System

Navien Condensing Combi Water Heater automatically fills water into space heating pipes when the unit senses water shortage in pipes.



Powerful Anti-Frozen Feature

If the system is plugged in, the unit and pipes are safe from extremely declining temperature in mid-winter.

Specifications

Applications: Under-Floor Heating System, Base Board Heating, Radiator or Fan Heating, Air-Handler Hydro Heating System and More.

Item		Model	CH-180	CH-210	CH-240 CH-240ASME
Heat Capacity (Input)	Natural Gas		Min: 17,000 Btu/h	Min: 20,000 Btu/h	Min: 20,000 Btu/h
			Max: 150,000 Btu/h	Max: 175,000 Btu/h	Max: 199,000 Btu/h
	LP Gas		Min: 17,000 Btu/h	Min: 20,000 Btu/h	Min: 20,000 Btu/h
			Max: 150,000 Btu/h	Max: 175,000 Btu/h	Max: 199,000 Btu/h
Flow Rate	45°F Rise		5.4 GPM	6.3 GPM	7.2 GPM
	77°F Rise		3.2 GPM	3.7 GPM	4.2 GPM
Dimensions (W x H x D)			17"x 28"x 12"	17"x 28"x 12"	17"x 28"x 12"
CA-AFUE			0.91	0.91	0.92
Weight			81 lbs	90 lbs	90 lbs
Installation Type			Indoor Wall-Hung		
Venting Type			Direct Vent		
Ignition			Electronic Ignition		
Space Heating Pressure (min-max)			7 - 30 PSI		
Water Pressure (min-max)			15 - 150 PSI		
Gas Supply Pressure (from source; min-max)			NG: 3.75"WC ~ 10.5"WC / LP: 8"WC ~ 13.5"WC		
Minimum Flow Rate to activate Water Heater			0.5 GPM		
Connection Sizes	Heating Supply / Heating Return		1" NPT		
	Cold Water Inlet / Hot Water Outlet		3/4" NPT		
	Gas Inlet		3/4" NPT		
Power Supply	Main Supply		120VAC, 60Hz 200W (max 2A)		
Heat Exchangers			Primary Heat Exchanger: Stainless Steel		
			Condensing Heat Exchanger: Stainless Steel		
Venting (0" Clearance)	Exhaust		SCH 40 3" PVC, SCH 40 2" PVC, Special Gas Vent Type BH Class IIA (PVC) in Canada		
	Intake		PVC, Flex Aluminum, Flex Stainless Steel, ABS		

* Navien America reserves the right to change specifications at anytime without prior notice.

Warranty Period

Item	Warranty Period	Item	Warranty Period
Heat Exchanger	10 years	Other Parts	5 years

Toll Free **1 - 800 - 519 - 8794**

Navien
Condensing
Combi Gas Boiler / Water Heater

www.NavienAmerica.com

Distributor:

Navien America Inc.
20 Goodyear, Irvine, CA 92618
TEL: 949-420-0420, FAX: 949-420-0430

Toll Free: **1-800-519-8794**

CH-E-10-11 (20101111)

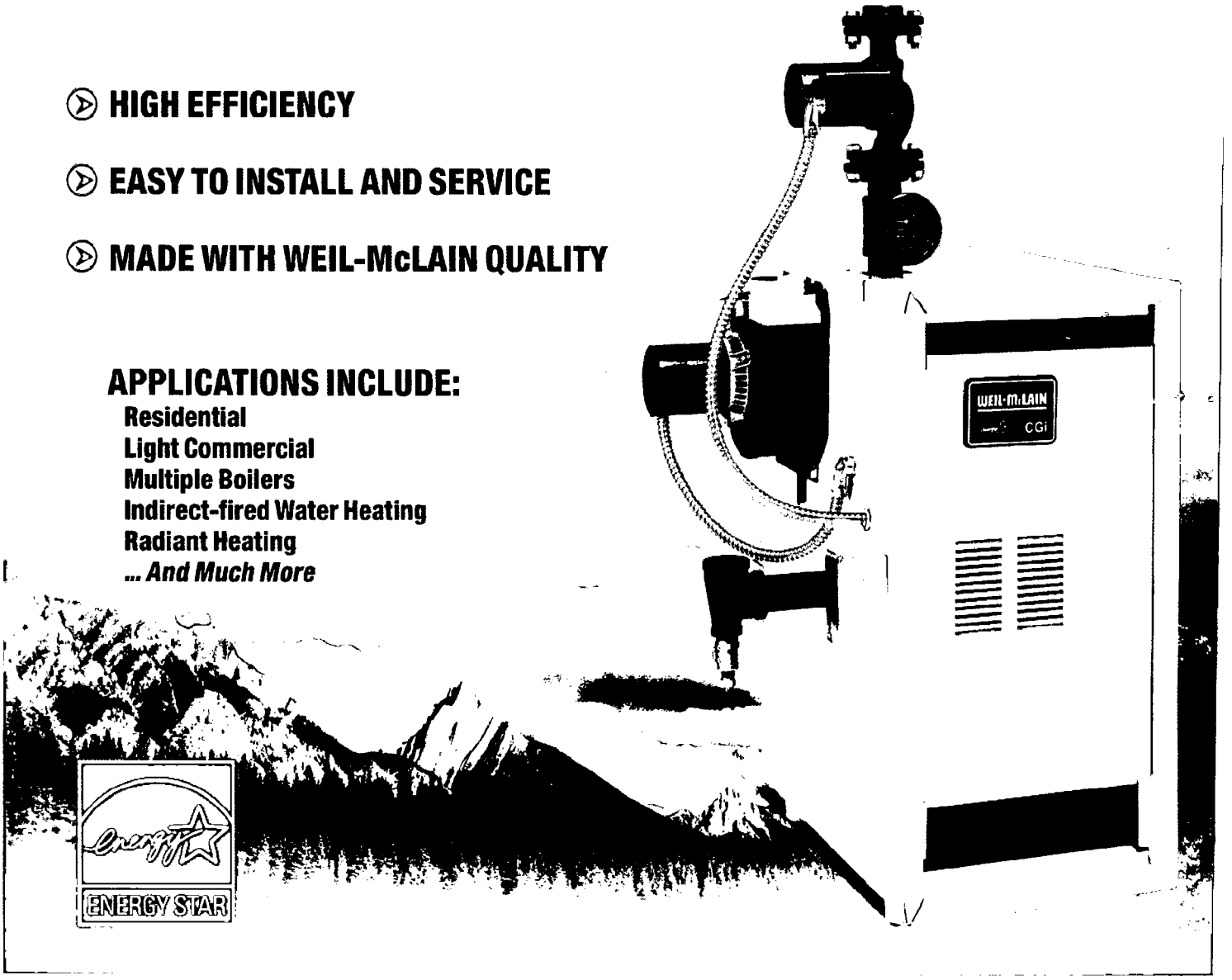
CGi - Gold Series Gas Boiler
Weil-McLain

Water,
Induced Draft
NAT'L or LP
MBH: 50-233
Efficiency Range 82%-85%

CGi
GOLD SERIES-GAS BOILER

- **HIGH EFFICIENCY**
- **EASY TO INSTALL AND SERVICE**
- **MADE WITH WEIL-McLAIN QUALITY**

APPLICATIONS INCLUDE:
Residential
Light Commercial
Multiple Boilers
Indirect-fired Water Heating
Radiant Heating
... And Much More



ENERGY STAR

WEIL-McLAIN
www.weil-mclain.com

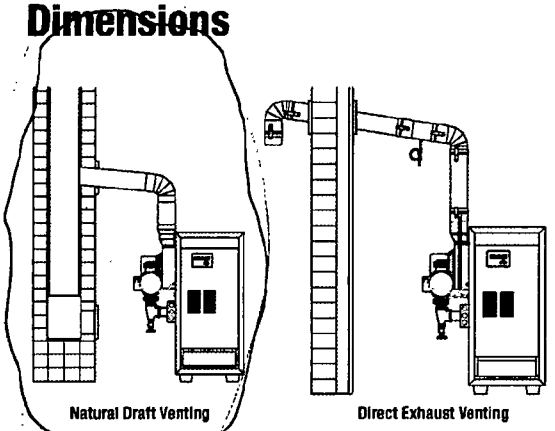
LIMITED WARRANTY to CONSUMERS · GOOD HOUSEKEEPING · Since 1909 · REPLACEMENT or REFUND if DEFECTIVE

Ratings

Model (1)	Input MBH (2)	DOE Heating Capacity MBH (2)	Net I=B=R Water Ratings MBH (3)	DOE Seasonal Efficiency Percent (AFUE)	Approx. Shipping Weight (Lbs)	Boiler Water Content (Gal.)	Minimum Vent Connector Diameter (4)
CGi-25	50	42	37	84.0	200	1.5	4" I.D.
CGi-3(*)	60	51	45	85.1	200	1.5	4" I.D.
CGi-4E(*)	90	76	66	85.0	240	2.1	5" I.D.
CGi-4	100	85	74	84.0	240	2.1	5" I.D.
CGi-5	120	100	87	83.3	280	2.7	5" I.D.
CGi-6	167	140	122	83.3	325	3.3	5" I.D.
CGi-7	200	167	145	83.0	370	3.8	5" I.D.
CGi-8	233	194	169	82.7	425	4.4	5" I.D.

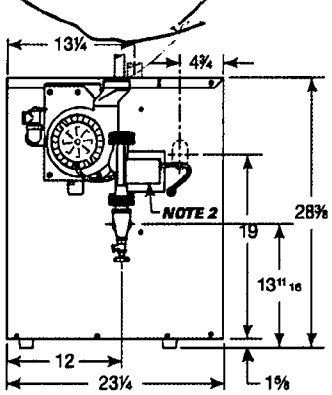
Notes:
(1) Add "PIN" for natural gas, "PIL" for propane.
(2) Based on standard test procedures prescribed by the United States Department of Energy.
(3) Net I=B=R ratings are based on net installed radiation of sufficient quantity for the requirements of the building and nothing needs to be added for normal piping and pick-up. Ratings are based on a piping and pick-up allowance of 115. An additional allowance should be made for unusual piping and pick-up loads.
(4) Refer to National Fuel Gas Code, ANSI Z223. 1-latest edition for chimney sizing and vent connector lengths.
* As an Energy Star Partner, Weil-McLain has determined that the CGi-3 and CGi-4E meet the Energy Star guidelines for energy efficiency. CGi boilers are C.S.A. design certified for installation on combustible flooring. Tested for 50 psi working pressure.

Dimensions

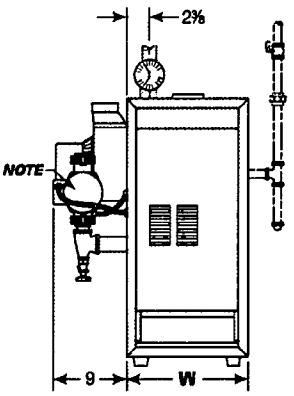


Model	Dimensions Inches W	Supply Piping In. (1)	Return Piping In. (1)	Nat or LP Gas Connection Size Inches	Crate Dimensions (Outside Measurements - In.) Length	Width	Height
CGi-25	10	3/4	3/4	1/2	27	27 1/2	31 1/2
CGi-3	10	1	1	1/2	27	27 1/2	31 1/2
CGi-4	13	1	1	1/2	27	27 1/2	31 1/2
CGi-4E(*)	13	1	1	1/2	27	27 1/2	31 1/2
CGi-5	16	1	1	1/2	30	27 1/2	31 1/2
CGi-6	19	1 1/4	1 1/4	1/2	33	27 1/2	31 1/2
CGi-7	22	1 1/4	1 1/4	3/4	36	27 1/2	31 1/2
CGi-8	25	1 1/2	1 1/2	3/4	42	27 1/2	31 1/2

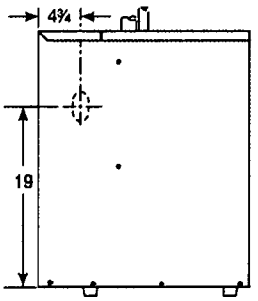
Notes: (1) Circulator flange supplied with boiler is same size as recommended pipe size. For supply and return boiler tapping size, see installation manual.



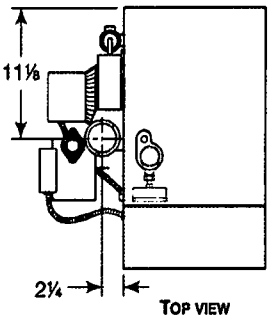
LEFT SIDE



FRONT



RIGHT SIDE



TOP VIEW

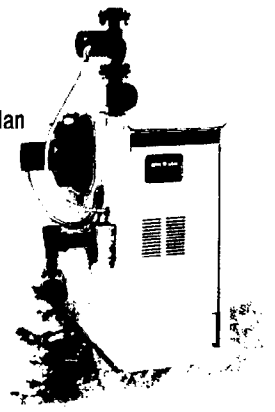
Note: Boiler circulator is shipped loose. Circulator may be mounted on either boiler supply or return piping. See dimension chart for pipe size of circulator flange provided.

Standard and Additional Equipment

Standard Equipment:
Factory Tested
Two-Piece Top Jacket Panel
Insulated Extended Steel Jacket
Cast Iron Sections with Built-in Air Separator
Radiation Plates
Steel Base
Integrated Boiler Control Module with Intermittent Electronic Ignition System & Indicator/Diagnostic Lights
Inducer Assembly
Flue Gas Collector/Transition Assembly
Combination Gas Valve for 24 Volt
Wiring Harness
Air Pressure Switch
Non-Linting Pilot Burner
High-Grade Stainless Steel Burners
40VA Transformer
Electrical Junction Box
Rollout Thermal Fuse Element
High-Limit Temperature Control
Circulator (when ordered)
30 PSI ASME Relief Valve (boiler sections tested for 50 PSI working pressure)
Combination Pressure-Temperature Gauge
Drain Valve

Additional Equipment:
CGi AL29-4C® Starter (same as CGs Starter)
Taco 007 Circulator
Expansion Tank Package (expansion tank, fill & check valve, auto air vent and fittings): #109-sizes 3 thru 5; #110-sizes 6 thru 8. Shipped in separate carton.
High Altitude Kits
W-M 5 & 10 Year Homeowner Protection Plan
W-M Indirect-fired Water Heaters
W-M Maxiflo® Pool Heaters
W-M Baseboard Units

WEIL-McLAIN



In the interest of continual improvements in product and performance, Weil-McLain reserves the right to change specifications without notice.
C-850 R1 (1108)

Update

Change of Contractor

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received 3/9/12
Control #

Date Issued
Permit # 04-23017-PA

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

Block 605 Lot 20 Qualification Code

Work Site Location [illegible]

Owner in Fee: [illegible]

Tel. (1 [redacted] e-mail

Address [illegible] (street) (municipality) (zip code)

Contractor: [illegible] Tel. ( )

Address [illegible] e-mail

Contractor License No. Exp. Date

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

Federal Emp. ID No. FAX: ( )

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 $ [illegible]

JOB SUMMARY (Office Use Only)

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

SUBCODE APPROVAL for PERMIT
Date:
Approved by:

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: [illegible]

Print name here: Michael [illegible]

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

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	
1	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	

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

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

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

Block _____ Lot _____ Qualification Code _____

Work Site Location _____

Owner in Fee: _____

Tel. (____) _____ e-mail _____

Address _____
street municipality zip code

Contractor: _____ Tel. (____) _____

Address _____ e-mail _____

Contractor License No. _____ Exp. Date _____

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

Federal Emp. ID No. _____ FAX: (____) _____

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 $ _____

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: _____
Approved by: _____

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: _____

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

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 _____	
____	Other _____	

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

[redacted]

[redacted]

Cmundy

1620 Forge

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 9/18/09
Control #
Date Issued
Permit # 09-2307

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

Block 825 Lot 20 Qualification Code

Work Site Location 1622 FORGE POND ROAD
BRICK NEW JERSEY

Owner in Fee: JOE DELLINO

Tel. [redacted] e-mail

Address 1622 Forge Pond Rd Brick N.J. 08723
street municipality zip code

Contractor: Green Electrical Enterprises Tel. (732) 903-6485

Address 40 Pinewood Dr. e-mail
BRICK TWP. N.J. 08724

Contractor License No. 16026 Exp. Date

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

Federal Emp. ID No. 260 625987 FAX: (732) 785-8380

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed New furnance

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

Building Occupied as Utility Co. JCEL

Est. Cost of Elec. Work $ $350.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[✓] No Plans Required 8-27-09 [illegible]

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Electric Plans Approved

Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in Card Date Issued

Final Cut-in Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: install furnance disconnect switch w/ Red boiler cover.

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

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

U.C.C. F120 (rev. 12/07) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received Control # 9/18/09

Date Issued Permit # 09-2307

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

Block 825 Lot 20 Qualification Code

Work Site Location 1622 FORGE POND ROAD
BRICK NEW JERSEY

Owner in Fee: JOE DICCLINO

Tel [redacted] e-mail

Address 1622 Forge Pond Rd Brick N.J. 08723
street municipality zip code

Contractor: Green Electrical Enterprises Tel. (732) 903-6485

Address 40 Pinewood Dr. e-mail
BRICK Twp. N.J. 08724

Contractor License No. 16026 Exp. Date

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

Federal Emp. ID No. 260 625987 FAX: (732) 7[illegible] 8[illegible]0

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed New furnace

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

Building Occupied as Utility Co. JCP&L

Est. Cost of Elec. Work $ 1 3[illegible]3.00

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[✓] No Plans Required 8-27-5 [illegible]

[ ] Partial -Underslab Utilities Approved

Date: Approved by:

[ ] Electric Plans Approved

Date: Approved by:

Joint Plan Review Required:
[ ] Bldg. [ ] Plumb. [ ] Fire. [ ] Elev.

SUBCODE APPROVAL for PERMIT

Date:

Approved by:

SUBCODE APPROVAL for CERTIFICATE

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK: install furnace disconnect switch w/ Red boiler cover.

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
1		Switches	
		Detectors	
		Light Poles	
		Motors—Fract. HP	
		Emergency & Exit Lights	
		Communications Points	
		Alarm Devices/F.A.C. Panel	
		TOTAL NUMBERS	$
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptacle	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Receptacle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air Handler	
		KW Baseboard Heat	
		HP Motors 1/+ HP	
		KW Transformer/Generator	
		AMP Service	
		AMP Subpanels	
		AMP Motor Control Center	
		KW Elec. Sign/Outline Light	

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

U.C.C. F120 (rev. 12/07) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

FERGUSON Heating & Cooling a WOLSELEY company

Project Summary
Entire House
MELLINO

825/20
09-2307

Job:
Date: 6.16.09
By: KAG

Project Information

For: DESANTIS
NJ

Notes: Ferguson Enterprises
190 N. Oberlin Ave.
Lakewod, N.J. 08701
Heat Loss Department: 732.905.1000

Design Information

Weather: Long Branch, NJ, US

Winter Design Conditions

Outside db	***0***	°F
Inside db	70	°F
Design TD	70	°F

Summer Design Conditions

Outside db	***92***	°F
Inside db	75	°F
Design TD	17	°F
Daily range	M	
Relative humidity	50	%
Moisture difference	27	gr/lb

Heating Summary

Structure	22264	Btuh
Ducts	4833	Btuh
Central vent (40 cfm)	3097	Btuh
Humidification	0	Btuh
Piping	0	Btuh
Equipment load	30194	Btuh

Sensible Cooling Equipment Load Sizing

Structure	15373	Btuh
Ducts	3752	Btuh
Central vent (40 cfm)	752	Btuh
Blower	0	Btuh
Use manufacturer's data	n	
Rate/swing multiplier	0.97	
Equipment sensible load	19281	Btuh

Infiltration

Method		Simplified
Construction quality		Average
Fireplaces		0
	Heating	**Cooling**
Area (ft²)	828	828
Volume (ft³)	7452	7452
Air changes/hour	0.61	0.32
Equiv. AVF (cfm)	76	40

Latent Cooling Equipment Load Sizing

Structure	1532	Btuh
Ducts	484	Btuh
Central vent (40 cfm)	741	Btuh
Equipment latent load	2758	Btuh
Equipment total load	22039	Btuh
Req. total capacity at 0.70 SHR	2.3	ton

Heating Equipment Summary

Make		
Trade		
Model		
Efficiency	80	AFUE
Heating input	0	Btuh
Heating output	0	Btuh
Low output baseboard	54	ft
Total low baseboard	650	Btuh/ft
High output baseboard	42	ft
Total high baseboard		
Space thermostat		

Cooling Equipment Summary

Make		
Trade		
Cond		
Coil		
Efficiency	0	EER
Sensible cooling	0	Btuh
Latent cooling	0	Btuh
Total cooling	817	cfm
Actual air flow	0.043	cfm/Btuh
Air flow factor	0.00	in H2O
Static pressure	0.88	
Load sensible heat ratio		

Bold/italic values have been manually overridden

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.

FERGUSON Heating & Cooling a WOLSELEY company

Load Short Form
Entire House
MELLINO

Job:
Date: 6.16.09
By: KAG

Project Information

For: DESANTIS
NJ

Design Information

	Htg	Clg
Outside db (°F)	***0***	***92***
Inside db (°F)	70	75
Design TD (°F)	70	17
Daily range	-	M
Inside humidity (%)	30	50
Moisture difference (gr/lb)	28	27

Infiltration

Method	Simplified
Construction quality	Average
Fireplaces	0

HEATING EQUIPMENT

Make
Trade
Model

Efficiency	80 AFUE	
Heating input	0	Btuh
Heating output	0	Btuh
Low output baseboard	500	Btuh/ft
Total low baseboard	54	ft
High output baseboard	650	Btuh/ft
Total high baseboard	42	ft
Space thermostat		

COOLING EQUIPMENT

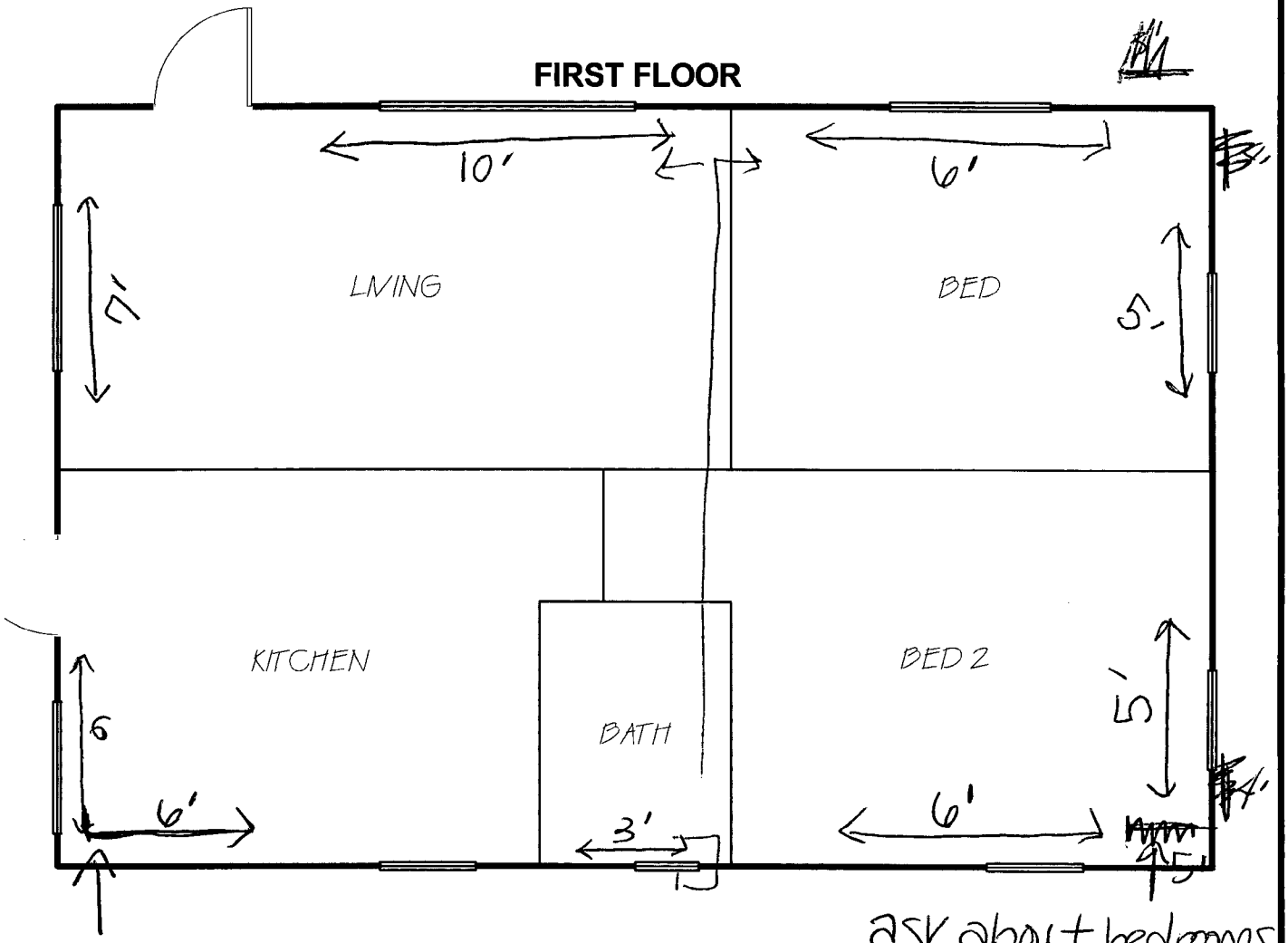
Make
Trade
Cond
Coil

Efficiency	0 EER	
Sensible cooling	0	Btuh
Latent cooling	0	Btuh
Total cooling	0	Btuh
Actual air flow	817	cfm
Air flow factor	0.043	cfm/Btuh
Static pressure	0.00	in H2O
Load sensible heat ratio	0.88	

ROOM NAME	Area (ft²)	Htg load (Btuh)	Clg load (Btuh)	Baseboard (ft) Low	Baseboard (ft) High	Clg AVF (cfm)
LIVING	231	8348	7435	17	13	318
BED	165	5727	4557	11	9	195
KITCHEN	188	6124	3464	12	9	148
BED 2	196	5583	2977	11	9	127
BATH	48	1314	692	3	2	30
Entire House d	828	27097	19125	54	42	817
Other equip loads		3097	752			
Equip. @ 0.97 RSM			19281			
Latent cooling			2758			
TOTALS	828	30194	22039	54	42	817

Bold/italic values have been manually overridden

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.



1 corner piece

1 f pipe up 3 inside corners
+ 2 4'
1 3'
1 5'

ask about bedrooms pipe up then down or pipe up w/ cover over it.

Job #: **Performed by KAG for:** DESANTIS NJ	**MELLINO** NJ	Scale: 1 : 63 Page 1 Right-Suite Residential 6.0.119 RSRQST30272 2009-Jun-16 09:58:01 E:\Simple Drive\Kyle's PC\Heat Los...

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723
(732) 262-1027

Subcode Official Review

To: 14 PINEWOOD DRIVE BRICK, NJ 08723 CC:

RE: Plumbing Subcode
Block: 825 Lot: 20 Qual:
1622 FORGE POND RD
Permit Number: Control Number: C-09-003044
Last Submit Date: Thursday, August 27, 2009

Date: Thursday, August 27, 2009

resubmit 9/8/09

Dear MELLINO, JOSEPH,

The following comments were made during the Plan Review process:

1- submit b.t.u. input&output of both new&old units or heat loss for new unit

2- GAS DRAWING DOES NOT REFLECT PIPE SIZES, DISTANCES OR BTU LOADS.

Of. 28.09
Called b/s
732-620-6166

Sincerely,

Robert Wennlund

Robert Wennlund, Subcode Official

2

1622 Forge Pond

FERGUSON Heating & Cooling a WOLSELEY company

Project Summary
Entire House
MELLINO PLUMBING

Job:
Date: 9.8.09
By: KAG

Project Information

For: JOE MELLINO
NJ

Notes: Ferguson Enterprises
190 N. Oberlin Ave.
Lakewod, N.J. 08701
Heat Loss Department: 732.905.1000

Design Information

Weather: Long Branch, NJ, US

Winter Design Conditions

Outside db	0	°F
Inside db	70	°F
Design TD	70	°F

Summer Design Conditions

Outside db	92	°F
Inside db	75	°F
Design TD	17	°F
Daily range	M	
Relative humidity	50	%
Moisture difference	27	gr/lb

Heating Summary

Structure	38425	Btuh
Ducts	13418	Btuh
Central vent (94 cfm)	7247	Btuh
Humidification	0	Btuh
Piping	0	Btuh
Equipment load	59090	Btuh

Sensible Cooling Equipment Load Sizing

Structure	29693	Btuh
Ducts	8938	Btuh
Central vent (94 cfm)	1760	Btuh
Blower	0	Btuh
Use manufacturer's data	n	
Rate/swing multiplier	0.97	
Equipment sensible load	39179	Btuh

Infiltration

Method	Simplified
Construction quality	Average
Fireplaces	0

	Heating	Cooling
Area (ft²)	1527	1527
Volume (ft³)	13743	13743
Air changes/hour	0.38	0.20
Equiv. AVF (cfm)	87	46

Latent Cooling Equipment Load Sizing

Structure	2244	Btuh
Ducts	1405	Btuh
Central vent (94 cfm)	1735	Btuh
Equipment latent load	5384	Btuh
Equipment total load	44562	Btuh
Req. total capacity at 0.75 SHR	4.4	ton

Heating Equipment Summary

Make		
Trade		
Model		
Efficiency	92.6	AFUE
Heating input	0	Btuh
Heating output	0	Btuh
Low output baseboard	104	ft
Total low baseboard	650	Btuh/ft
High output baseboard	80	ft
Total high baseboard		
Space thermostat		

Cooling Equipment Summary

Make		
Trade		
Cond		
Coil		
Efficiency	0	EER
Sensible cooling	0	Btuh
Latent cooling	0	Btuh
Total cooling	1643	cfm
Actual air flow	0.043	cfm/Btuh
Air flow factor	0.10	in H2O
Static pressure	0.88	
Load sensible heat ratio		

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.

FERGUSON Heating & Cooling a WOLSELEY company

Load Short Form
Entire House
MELLINO PLUMBING

Job:
Date: 9.8.09
By: KAG

Project Information

For: JOE MELLINO
NJ

Design Information

	Htg	Clg
Outside db (°F)	0	92
Inside db (°F)	70	75
Design TD (°F)	70	17
Daily range	-	M
Inside humidity (%)	30	50
Moisture difference (gr/lb)	28	27

Infiltration	
Method	Simplified
Construction quality	Average
Fireplaces	0

HEATING EQUIPMENT

Make
Trade
Model

Efficiency	92.6 AFUE	
Heating input	0	Btuh
Heating output	0	Btuh
Low output baseboard	500	Btuh/ft
Total low baseboard	104	ft
High output baseboard	650	Btuh/ft
Total high baseboard	80	ft
Space thermostat		

COOLING EQUIPMENT

Make
Trade
Cond
Coil

Efficiency	0 EER	
Sensible cooling	0	Btuh
Latent cooling	0	Btuh
Total cooling	0	Btuh
Actual air flow	1643	cfm
Air flow factor	0.043	cfm/Btuh
Static pressure	0.10	in H2O
Load sensible heat ratio	0.88	

ROOM NAME	Area (ft²)	Htg load (Btuh)	Clg load (Btuh)	Baseboard (ft) Low	Baseboard (ft) High	Clg AVF (cfm)
ROOM 1	132	5219	3584	10	8	152
ROOM 2	154	5646	3273	11	9	139
ROOM 3	110	2425	1931	5	4	82
BATH	72	2339	1323	5	4	56
LIVING	247	6689	4625	13	10	197
KITCHEN	220	3303	3833	7	5	163
DEN	130	10442	12144	21	16	517
ROOM 4	462	15778	7917	32	24	337

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.

Entire House	d	1527	51843	38630	104	80	1643
Other equip loads			7247	1760			
Equip. @ 0.97 RSM				39179			
Latent cooling				5384			
TOTALS		1527	59090	44562	104	80	1643

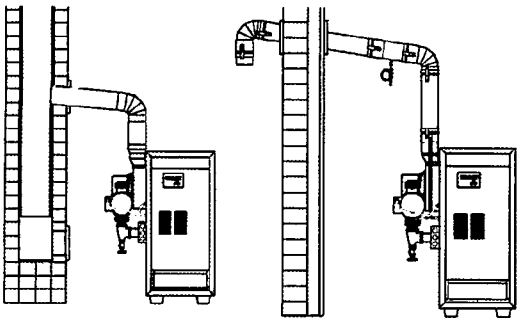
Printout certified by ACCA to meet all requirements of Manual J 8th Ed.

Ratings

Model (1)	Input MBH (2)	DOE Heating Capacity MBH (2)	Net I=B=R Water Ratings MBH (3)	DOE Seasonal Efficiency Percent (AFUE)	Approx. Shipping Weight (Lbs)	Boiler Water Content (Gal.)	Minimum Vent Connector Diameter (4)
CGi-25	50	42	37	84.0	200	1.5	4" I.D.
CGi-3(*)	60	51	45	85.1	200	1.5	4" I.D.
CGi-4E(*)	90	76	66	85.0	240	2.1	5" I.D.
CGi-4	100	85	74	84.0	240	2.1	5" I.D.
CGi-5	120	100	87	83.3	280	2.7	5" I.D.
CGi-6	167	140	122	83.3	325	3.3	5" I.D.
CGi-7	200	167	145	83.0	370	3.8	5" I.D.
CGi-8	233	194	169	82.7	425	4.4	5" I.D.

Notes:
(1) Add "PIN" for natural gas, "PIL" for propane.
(2) Based on standard test procedures prescribed by the United States Department of Energy.
(3) Net I=B=R ratings are based on net installed radiation of sufficient quantity for the requirements of the building and nothing needs to be added for normal piping and pick-up. Ratings are based on a piping and pick-up allowance of 115. An additional allowance should be made for unusual piping and pick-up loads.
(4) Refer to National Fuel Gas Code, ANSI Z223. 1-latest edition for chimney sizing and vent connector lengths.
* As an Energy Star Partner, Weil-McLain has determined that the CGi-3 and CGi-4E meet the Energy Star guidelines for energy efficiency.
CGi boilers are C.S.A. design certified for installation on combustible flooring. Tested for 50 psi working pressure.

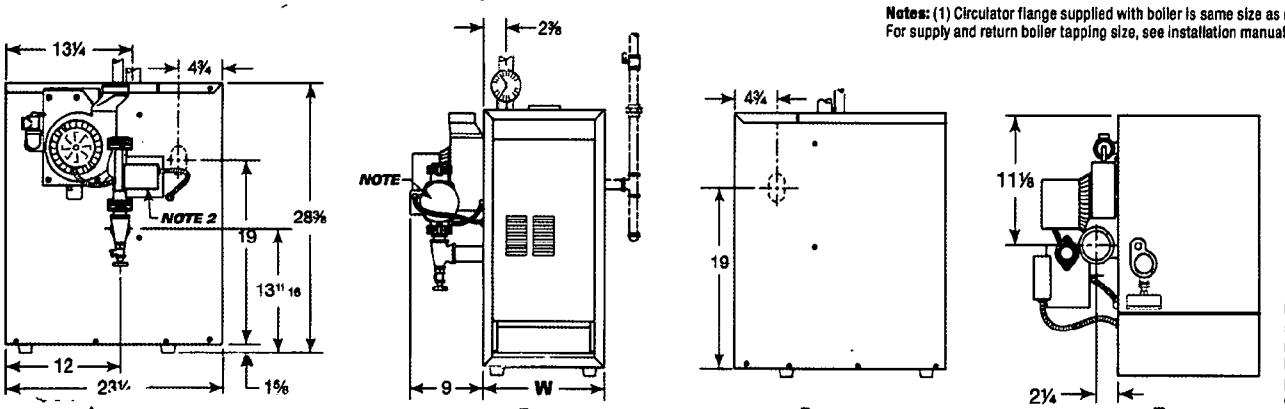
Dimensions



Natural Draft Venting — Direct Exhaust Venting

Model	Dimensions Inches W	Supply Piping In. (1)	Return Piping In. (1)	Nat or LP Gas Connection Size Inches	Crate Dimensions (Outside Measurements - In.) Length	Width	Height
CGi-25	10	3/4	3/4	1/2	27	27 1/2	31 1/2
CGi-3	10	1	1	1/2	27	27 1/2	31 1/2
CGi-4	13	1	1	1/2	27	27 1/2	31 1/2
CGi-4E(*)	13	1	1	1/2	27	27 1/2	31 1/2
CGi-5	16	1	1	1/2	30	27 1/2	31 1/2
CGi-6	19	1 1/4	1 1/4	1/2	33	27 1/2	31 1/2
CGi-7	22	1 1/4	1 1/4	3/4	36	27 1/2	31 1/2
CGi-8	25	1 1/2	1 1/2	3/4	42	27 1/2	31 1/2

Notes: (1) Circulator flange supplied with boiler is same size as recommended pipe size. For supply and return boiler tapping size, see installation manual.



LEFT SIDE — FRONT — RIGHT SIDE — TOP VIEW

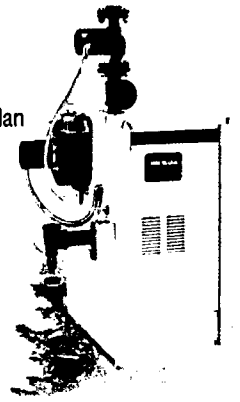
Note: Boiler circulator is shipped loose. Circulator may be mounted on either boiler supply or return piping. See dimension chart for pipe size of circulator flange provided.

Standard and Additional Equipment

Standard Equipment:
Factory Tested
Two-Piece Top Jacket Panel
Insulated Extended Steel Jacket
Cast Iron Sections with Built-in Air Separator
Radiation Plates
Steel Base
Integrated Boiler Control Module with Intermittent Electronic Ignition System & Indicator/Diagnostic Lights
Inducer Assembly
Flue Gas Collector/Transition Assembly
Combination Gas Valve for 24 Volt
Wiring Harness
Air Pressure Switch
Non-Linting Pilot Burner
High-Grade Stainless Steel Burners
40VA Transformer
Electrical Junction Box
Rollout Thermal Fuse Element
High-Limit Temperature Control
Circulator (when ordered)
30 PSI ASME Relief Valve (boiler sections tested for 50 PSI working pressure)
Combination Pressure-Temperature Gauge
Drain Valve

Additional Equipment:
CGi AL29-4C® Starter (same as CGs Starter)
Taco 007 Circulator
Expansion Tank Package (expansion tank, fill & check valve, auto air vent and fittings): #109-sizes 3 thru 5; #110-sizes 6 thru 8. Shipped in separate carton.
High Altitude Kits
W-M 5 & 10 Year Homeowner Protection Plan
W-M Indirect-fired Water Heaters
W-M Maxiflo® Pool Heaters
W-M Baseboard Units

WEIL-McLAIN



In the interest of continual improvements in product and performance, Weil-McLain reserves the right to change specifications without notice.
C-850 R1 (1108)

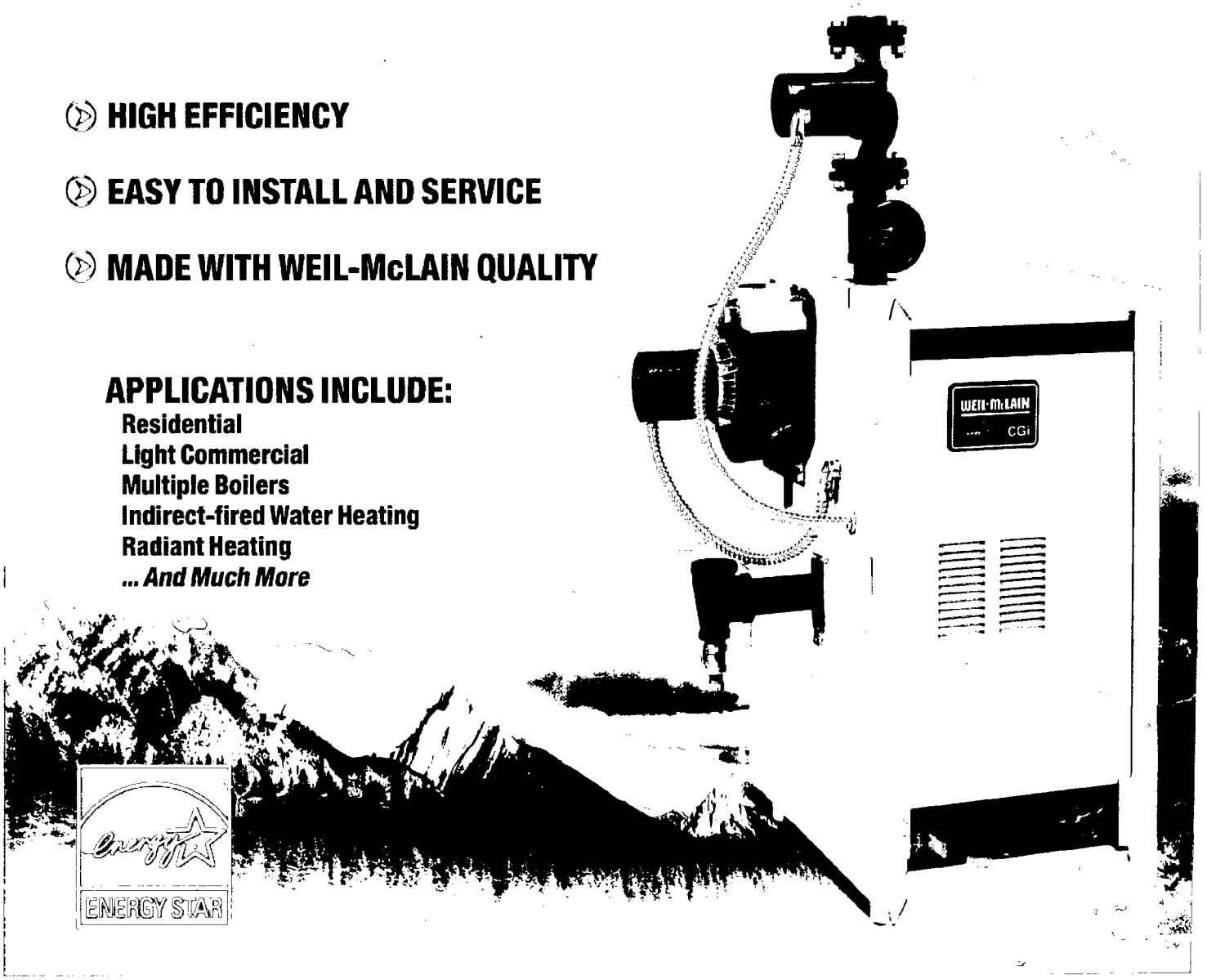
CGi - Gold Series Gas Boiler
Weil-McLain

Water,
Induced Draft
NAT'L or LP
MBH: 50-233
Efficiency Range 82%-85%

CGi
GOLD SERIES-GAS BOILER

- **HIGH EFFICIENCY**
- **EASY TO INSTALL AND SERVICE**
- **MADE WITH WEIL-McLAIN QUALITY**

APPLICATIONS INCLUDE:
Residential
Light Commercial
Multiple Boilers
Indirect-fired Water Heating
Radiant Heating
... And Much More



ENERGY STAR

WEIL-McLAIN
www.weil-mclain.com

GOOD HOUSEKEEPING
Since 1909

11

No fire needed

for

Boiler

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

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

[redacted] 825 [redacted] 20 Qualification Code
[redacted] 1622 FORGE POND ROAD
BRICK NEW JERSEY 08723
[redacted] JOE MELLINO
Address 1622 Forge Pond Road
Brick New Jersey 08723
Tel [redacted]
Contractor
Address
Homeowner
Tel ( ) FAX ( )
Fire Protection Equipment, NJ Div of Fire Safety Permit No.
Fire Protection Equipment, NJ Div of Fire Safety Installer No.
Fire Alarm Contractor No.
Federal Emp. No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present ____ Proposed ____
Constr. Class: Present ____ Proposed ____
Heating System: [ ] New OR [✓] Existing [ ] HVAC
Type: [✓] Gas [ ] Oil [ ] Electric [ ] Solar
[ ] Other
Location:
Fuel Storage Tank:
Fuel Type: [ ] Flammable OR [ ] Combustible Capacity
Total Cost of Fire Protection Work $ 100 00

Fire Alarm System: [ ] New OR [ ] Existing
Location of Panel:
Fire Suppression/Standpipe System:
[ ] New OR [ ] Existing
Location of Main Control Valve:

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Plumbing
[ ] Electric [ ] Elevator
[ ] Fire Plans Approved
Date:
Approved by:

SUBCODE APPROVAL
[ ] CO [ ] CCO [ ] CA
Date:
Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

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.

Applicant's Signature/Contractor's Signature

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA
DESCRIPTION OF WORK:

Water Supply Source
Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Preaction Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fired Appliances [✓] Gas or [ ] Oil		
Fireplace Venting/Metal Chimney		
Other		

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

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

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

Block 825 Lot 20 Qualification Code

Work Site Location 1622 FORGE POND ROAD
BRICK NEW JERSEY 08723

Owner in Fee JOE MELLINO

Address 1622 Forge Pond Road
Brick New Jersey 08723

Tel [redacted]

Contractor

Address

Tel ( ) FAX ( )

Fire Protection Equipment, NJ Div of Fire Safety Permit No.

Fire Protection Equipment, NJ Div of Fire Safety Installer No.

Fire Alarm Contractor No.

Federal Emp. No.

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present ____ Proposed ____

Constr. Class: Present ____ Proposed ____

Heating System: [ ] New OR [✓] Existing [ ] HVAC

Type: [✓] Gas [ ] Oil [ ] Electric [ ] Solar

[ ] Other

Location:

Fuel Storage Tank:

Fuel Type: [ ] Flammable OR [ ] Combustible Capacity

Total Cost of Fire Protection Work $ 100 00

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel:

Fire Suppression/Standpipe System:

[ ] New OR [ ] Existing

Location of Main Control Valve:

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Electric [ ] Elevator

[ ] Fire Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other				

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.

Applicant's Signature/Contractor's Signature

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source

Method of Alarm/Suppression System Supervision

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices		
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Preaction Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fired Appliances [✓] Gas or [ ] Oil		
Fireplace Venting/Metal Chimney		
Other		

Administrative Surcharge $

Minimum Fee $

State Permit Surcharge Fee $

TOTAL FEE $

U.C.C. F140
(rev. 1/04)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

FIRE PROTECTION SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

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

Block 825 Lot 22 Qualification Code _____

Work Site Location 1622 FORGE POND ROAD
BRICK NEW JERSEY 08723

Owner in Fee JOE MILLINO

Address 1622 Forge Pond Road
Brick New Jersey 08723

Tel [redacted]

Contractor _____

Address _____

Tel ( ) _____ FAX ( ) _____

Fire Protection Equipment, NJ Div of Fire Safety Permit No. _____

Fire Protection Equipment, NJ Div of Fire Safety Installer No. _____

Fire Alarm Contractor No. _____

Federal Emp. No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group: Present _____ Proposed _____

Constr. Class: Present _____ Proposed _____

Heating System: [ ] New OR [✓] Existing [ ] HVAC

Type: [✓] Gas [ ] Oil [ ] Electric [ ] Solar

[ ] Other _____

Location: _____

Fuel Storage Tank:

Fuel Type: [ ] *Flammable* OR [ ] *Combustible* *Capacity* _____

Total Cost of Fire Protection Work $ _____

Fire Alarm System: [ ] New OR [ ] Existing

Location of Panel: _____

Fire Suppression/Standpipe System:

[ ] New OR [ ] Existing

Location of Main Control Valve: _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Electric [ ] Elevator

[ ] Fire Plans Approved

Date: _____

Approved by: _____

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: _____

Approved by: _____

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
		Dates (Month/Day)		
Alarm System				
Suppression Sys.				
Standpipe				
Fire Pump				
Pre-Eng. System				
Mechanical				
Smoke Control				
TCO				
Flam/Combust Tanks				
Fireplace Venting				
Final				
Other _____				

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. _____

Applicant's Signature/Contractor's Signature

[ ] Certified Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

Water Supply Source _____

Method of Alarm/Suppression System Supervision _____

	NUMBER	FEE (Office Use Only)
Flammable/Combustible Tanks		
Alarm Systems		
[ ] System		
[ ] 110v Interconnected		
[ ] CO Detectors/110v		
Alarm Devices (i.e., smoke, heat, pulls, water/flow)		
Supervisory Devices (i.e., tampers, low/high air)		
Signaling Devices (i.e., horn/strobes, bells)		
Other Devices _____		
TOTAL		
Suppression Systems		
Fire Pump ____ GPM Type ____		
Dry Pipe/Alarm Valves		
Preaction Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
FM200 Suppression		
Other _____		
Other Systems		
Kitchen Hood Exhaust System		
Smoke Control System		
Fired Appliances [✓] Gas or [ ] Oil	1	
Fireplace Venting/Metal Chimney		
Other _____		

Administrative Surcharge $ _____

Minimum Fee $ _____

State Permit Surcharge Fee $ _____

TOTAL FEE $ _____

FOR REPLACEMENT FURANCE

Submit b.t.u. input & output of both new & old units.

OLD B.T.U. ~~105000~~ Input 102000 Output ~~100000~~ 105000

NEW B.T.U._____ Input 100 Output_____

And/Or

Heat loss for new Unit.

***If you do not have old b.t.u. and new b.t.u. of units, you will have to submit a Heat Loss.

***If the New Unit B.T.U. are less than the Old Unit B.T.U. you will have to submit a Heat Loss.

Green _ Electrical Enterprises
& General Contractor L.L.C.

Ramiro Cubas
Master Electrician
License #16026

40 Pinewood Drive
Brick, N.J. 08724
Tel 732.903.6485
Fax 732.785.8380
www.green-electrical.com

APPLICATION FOR CERTIFICATE

Permit #
Date Issued
- or -
Control #
Certificate Application Received:
Certificate Issued:

IDENTIFICATION

Work Site Location 1622 FORGE POND ROAD Block 825 Lot 20 Qualification Code _____
BRICK, NEW JERSEY 08723

Contractor _____

Owner in Fee Joe Mellino

Address _____

Address 1622 FORGE POND ROAD
BRICK, NEW JERSEY 08723

License No. _____ Tel. (___) _____

T[redacted]

Federal Employee No. _____

ACTION

- ☐ CERTIFICATE OF OCCUPANCY
- ☐ CERTIFICATE OF CONTINUED OCCUPANCY
- ☐ LEAD HAZARD ABATEMENT CERTIFICATE OF CLEARANCE
- ☐ TEMPORARY CERTIFICATE OF OCCUPANCY

USE GROUP _____ Previous _____ Current

FINAL COST OF CONSTRUCTION: $ 550.00

(Include value of any new structure, all on-site improvements, built-in furnishings and fixtures and all integral equipment exclusive of process or manufacturing equipment.)

Describe below any substantive deviation in dimension, lay out or appearance of the building or structure from the released plans and specifications filed with the construction permit application. Please note, a set of amended drawings may be required.

If you are requesting a Temporary Certificate of Occupancy, please explain why in the space below.

DESCRIPTION OF WORK/USE:

I hereby attest that to the best of my knowledge, the completed project meets the conditions of the construction permit and all prior approvals, and all work has been completed substantially in accordance with the code and with those portions of the plans and specifications controlled by the code, with any substantial deviations noted. Incomplete items listed on a Temporary Certificate of Occupancy will be completed by the date on the Certificate.

SIGNED: _____
OWNER/AGENT

☐ OWNER ☐ AGENT

U.C.C. F270
(rev. 5/2003)