Called 12/27

BLOCK 825 LOT 35 QUALIFICATION CODE C12.55 ADDRESS (SITE) 1629 Tilford Blvd PERMIT NO. 04 2563

~~Township of Howell~~
~~Preventorium Road P.O. Box 580~~
~~Howell, New Jersey 07731~~

CONSTRUCTION PERMIT APPLICATION

Bricic

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

I. IDENTIFICATION

1. Propsed Work Site at: 1629 Tilford Blvd
2. Name of Owner in Fee: WATSON [redacted]
   Address 1629 Tilford Blvd Brick 08724
   street municipality zip code
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: Trinity Heating & Air Tel. (732) 780-3779
   Address 800 US Hwy 9 South Freehold NJ. 07728
   License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____
   Federal Employee No. 223292324 FAX: (_____) _____
5. Architect or Engineer _____ Tel. (_____) _____
   Address _____
6. Responsible Person in Charge of Work Trinity Heating & Air INC
   Tel. (732) 780-3779 FAX (732) 780-6671

boiler?

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 44		
2. Electrical	35		
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. DCA Training Fee	3		
10. Subtotal			
11. Cert. of Occupancy			
12. Other			
13. TOTAL	$ 82		

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

	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									
4. ☐ Alteration									
5. ☑ Fire Protection									
6. ☐ Plumbing					12/12/07	RV			
7. ☑ Electrical					12/15/07	RV			
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	3200								

OPTIONAL (for office use only)

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
8. ☐ Smoke Control Systems in Open Wells
9. ☐ Underground Storage Tanks

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL

1. ☐ Hotels (R-1)
2. ☐ Multi-Family (R-2)
3. ☐ Two-Family (R-3) BOCA
4. ☐ Two-Family (R-4) CABO
5. ☑ One-Family (R-3) BOCA
6. ☐ One-Family (R-4) CABO

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:

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

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

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

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

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

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

Signature _____ Date _____

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

I hereby certify the following as required by the Uniform Construction Code, N.J.A.C. 5:32-2.15(d): the proposed work is authorized by the owner in fee; and I have been authorized by the owner in fee to make this application as his agent.

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

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

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

(✓ Check if contractor.

Agent Name Trinity Heating and Air INC

Address 800 US Hwy 9 South

Freehold NJ 07728

Telephone (732) 780-3775

Signature Thomas Pollock

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

Brick

CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

IDENTIFICATION Block 825 Lot 35

Work Site Location 1629 Tilford Blvd.
Brick, New Jersey 08724

Owner in Fee WATSON

Address Same As Above

Tel [redacted]

Contractor Trinity Heating and Air

Address 800 Rt. 9 South
Freehold, New Jersey 07728

Tel. (732) 780-3779

Lic. No. or Bldrs. Reg. No.

Fed. Emp. No. 223292324

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:

Replace Boiler - OIL

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 3800

Construction Official

Date

PAYMENTS (Office Use Only)

Building
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA Training Fee
Cert. of Occupancy
Other
Total
Check No.
Cash
Collected by

U.C.C. F170
(rev. 3/96)

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

(see reverse side)

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

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

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

U.C.C. Form F-170D

Brick

CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

IDENTIFICATION Block 825 Lot 35

Work Site Location 1629 Tilford Blvd. Brick, New Jersey 08724

Owner in Fee WATSON

Address Same As Above

Tel. [redacted]

Contractor Trinity Heating and Air

Address 600 Rt. 9 South Freehold, New Jersey 07728

Tel. (732) 780-3779

Lic. No. or Bldrs. Reg. No.

Fed. Emp. No. 223792324

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: 12/16

Replace Boiler - OIL

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 3800

Construction Official

Date

PAYMENTS (Office Use Only)

Building
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA Training Fee
Cert. of Occupancy
Other
Total
Check No.
Cash
Collected by

U.C.C. F170
(rev. 3/96)

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

(see reverse side)

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 work installed conforms to the approved plans and 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 given.

☐ Required inspections for all subcodes for one and two family dwellings are the following:

1. The bottom of footing trenches before placement of footings, except that in the case 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 and connections prior to covering with finish or infill material; plumbing underground services, rough piping, water service, sewer, septic services and storm drains; electrical rough wiring, panels and service installations; insulation installations;
4. Installation of all finished materials, sealings of exterior joints; plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

☐ 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. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

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

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

U.C.C. Form F-170D

Brick

CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

IDENTIFICATION Block 825 Lot 35

Work Site Location 1629 Hilliard Blvd. Brick, NJ 08724

Owner in Fee WATSON

Address Sima As Drove

[redacted]

Contractor Trinity Heating and Air

Address [illegible] Freehold, NJ 07728

Tel. (732) 780-3779

Lic. No. or Bldrs. Reg. No.

Fed. Emp. No. [illegible]4

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:

Repair Boiler oil

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 3800

Construction Official

Date

PAYMENTS (Office Use Only)

Building
Electrical
Plumbing
Fire Protection
Elevator Devices
Other
DCA Training Fee
Cert. of Occupancy
Other
Total
Check No.
Cash
Collected by

U.C.C. F170
(rev. 3/96)

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

(see reverse side)

REQUIRED INSPECTIONS

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

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

U.C.C. Form F-170D

CONSTRUCTION PERMIT

Date Issued
Control #
Permit #

IDENTIFICATION Block _____ Lot _____

Work Site Location _____

Owner in Fee _____

Address _____

Tel. (____) _____

Contractor _____

Address _____

Tel. (____) _____

Lic. No. or Bldrs. Reg. No. _____

Fed. Emp. 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:

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ _____

_____ Construction Official

_____ Date

PAYMENTS (Office Use Only)

Building _____
Electrical _____
Plumbing _____
Fire Protection _____
Elevator Devices _____
Other _____
DCA Training Fee _____
Cert. of Occupancy _____
Other _____
Total _____
Check No. _____
Cash _____
Collected by _____

U.C.C. F170
(rev. 3/96)

1 WHITE—INSPECTOR COPY 2 CANARY—OFFICE COPY 3 PINK—OFFICE COPY 4 GOLD—APPLICANT COPY

(see reverse side)

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 work installed conforms to the approved plans and the requirements of the Uniform Construction Code.

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☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. Any violations of the approved plans and/or permit will be noted and the holder of the permit notified of discrepancies.

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

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

U.C.C. Form F-170D

C3E

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

Date Issued 06/22/2004
Control #
Permit # 04-2563

UCC NEW JERSEY

CONSTRUCTION PERMITE

IDENTIFICATION Block 825 Lot 35 Qual

Work Site Location 1629 TILFORD BLVD
REPLACE BOILER
Owner in Fee WATSON
Address SAME
BRICK, NJ 08724-
Telephone [redacted]

Contractor TRINITY HEATING AND AIR
Address 800 ROUTE 9 SOUTH
FREEHOLD, NJ 07728-
Telephone (732)780-3779
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3292324

Is hereby granted permission to perform the following work:

[ ] BUILDING [X] PLUMBING [ ] LEAD HAZARD ABATEMENT
[X] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT [ ] OTHER
(Subchapter 8 only)

DESCRIPTION OF WORK:
REPLACE BOILER

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 3,800

Construction Official 06/22/2004 Date

U.C.C. F170 (rev. 3/96) NJ UCCAPS 5.24E

PAYMENTS (Office Use Only)

Building	0
Electrical	44
Plumbing	35
Fire Protection	0
Elevator Devices	0
Other	
DCA State Permit Fee	3
Cert. of Occupancy	0
Other	
Total	82
Check No.	20954
Cash	
Collected By	ERP

06/22/04 9:47AM 001558#0475
XX07 SERV.007

#042563	
ELECTRIC	$44.00
PLUMBING	$35.00
DCA	$3.00
CHECK	$82.00

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 12/12/2002
Date Issued 12/12/04
Control # ~~C12-55~~
Permit # 042263

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

Block 825 Lot 35 Qual
Work Site Location 1629 TILFORD BLVD
REPLACE BOILER
Owner in Fee MATSON
Address SAME
BRICK, NJ 08724-
Tele.([redacted]
Contractor IRINIIY HEATING AND AIR
Address 979 U.S. HWY'S
HOWELL, NJ 07731-
Tele.(732)780-3779
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3292324

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed U
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 200

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[~~ ~~] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 12/18/02 BS
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
1		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
1		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

C. CERTIFICATION IN LIEU OF OATH

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

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

Paid [ ] Check # Collected by:

Administrative Surcharge	$ 0
Minimum Fee	$ 0
TOTAL FEE	$ 44
DCA State Permit Fee	$ 0

U.C.C. F120 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
ELECTRICAL
SUBCODE
TECHNICAL SECTION

Date Received 12/12/2002
Date Issued 12/22/04
Control # C12-55
Permit # 042463

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

Block 825 Lot 35 Qual
Work Site Location 1629 ILLFORD BLVD
REPLACE BOILER
Owner in Fee WATSON
Address SAME
BRICK NJ 08724-
Te [redacted]
Contractor INFINITY HEATING AND AIR
Address 979 U.S. HWY'S
HOWELL, NJ 07731-
Tele.(732)780-3779
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3292324

B. ELECTRICAL CHARACTERISTICS

Use Group - Present Proposed U
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Estimated Cost of Electrical Work $ 200

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Plumb
[ ] Fire [ ] Elevator
[X] Elect Plans Approved
Date: 12/15/04
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Temp Serv				
Const Serv				
TCO				
Other				
Service				
Final				

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

C. CERTIFICATION IN LIEU OF OATH

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

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

D. TECHNICAL SITE DATA

NO.	SIZE	ITEM	FEE (Office Use Only)
0		Lighting Fixtures	
0		Receptacles	
1		Switches	
0		Detectors	
0		Light Poles	
0		Motors-Fract HP	
0		Emergency & Exit Lights	
0		Communications Points	
0		Alarm Devices/F.A.C. Panel	
1		TOTAL NUMBERS	35
0		Pool Permit/with UW Lights	0
0		Storable Pool/Spa/Hot Tub	0
0	0	KW Elect Range/Receptacle	0
0	0	KW Oven/Surface Unit	0
0	0	KW Elect Water Heater	0
0	0	KW Elect Dryer/Receptacle	0
0	0	KW Dishwasher	0
0	0	HP Garbage Disposal	0
0	0	KW Central A/C Unit	0
1	3	HP/KW Space Heater/Air Handler	9
0	0	Baseboard Heat	0
0	0	HP Motors 1/+ HP	0
0	0	KW Transformer/Generator	0
0	0	AMP Service	0
0	0	AMP Subpanels	0
0	0	AMP Motor Control Center	0
0	0	KW Elect Sign/Outline Light	0
		Other	0
		Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 44
DCA State Permit Fee $ 0

U.C.C. F120 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 12/12/2002
Date Issued 6/12/04
Control # C12-55
Permit # 04-2163

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

Block 825 Lot 35 Qual

Work Site Location 1629 TILFORD BLVD
REPLACE BOILER

Owner in Fee WATSON

Address SAME
BRICK NJ 08724-

Tele. [redacted]

Contractor TRINITY HEATING AND AIR

Address 979 U.S. HWY'S
HOWELL, NJ 07731-

Tele.(732)780-3779

Lic. No. or Bldrs. Reg. No.

Federal Emp. No. 22-3292324

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed U

Building Sewer Size [ ] Public Sewer [ ] Private Septic

Water Sewer Size [ ] Public Water [ ] Private Well

Estimated Cost of Plumbing Work $ 3,600

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 12/12/02
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

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

Signature/Contractor Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
0	Water Heater	0
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
1	Hot Water Boiler	35
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 35
DCA State Permit Fee $ 3

U.C.C. F130 (rev. 3/96)

TOWNSHIP OF BRICK
401 CHAMBERS BRIDGE RD
DIVISION OF INSPECTIONS

UCC NEW JERSEY
PLUMBING
SUBCODE
TECHNICAL SECTION

Date Received 12/12/2002
Date Issued 6/22/04
Control # C12-55
Permit # 042163

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

Block 825 Lot 35 Qual
Work Site Location 1629 TILFORD BLVD
REPLACE BOILER
Owner in Fee WATSON
Address SAME
BRICK NJ 08724-
Tele. [redacted]
Contractor TRINITY HEATING AND AIR
Address 979 U.S. HWY'S
HOWELL, NJ 07731-
Tele.(732)780-3779
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. 22-3292324

B. PLUMBING CHARACTERISTICS

Use Group Present Proposed U
Building Sewer Size [ ] Public Sewer [ ] Private Septic
Water Sewer Size [ ] Public Water [ ] Private Well
Estimated Cost of Plumbing Work $ 3,600

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Bldg [ ] Elect
[ ] Fire [ ] Elevator
[ ] Plumb. Plans Approved
Date: 12/12/02
Approved By:

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

INSPECTIONS Type	Dates (Month/Day) Failure	Failure	Approval	Initial
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equip.				
Gas Piping				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

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

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

D. TECHNICAL SITE DATA (List all fixtures.)

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
0	Water Closet	0
0	Urinal / Bidet	0
0	Bath Tub	0
0	Lavatory	0
0	Shower	0
0	Floor Drain	0
0	Sink	0
0	Dishwasher	0
0	Drinking Fountain	0
0	Washing Machine	0
0	Hose Bib	0
0	Water Heater	0
0	Fuel Oil Piping	0
0	Gas Piping	0
0	Steam Boiler	0
1	Hot Water Boiler	35
0	Sewer Pump	0
0	Interceptor / Separator	0
0	Backflow Preventer	0
0	Greasetrap	0
0	Sewer Connection	0
0	Water Service Connection	0
0	Stacks	0
	Other	0
	Other	0

Administrative Surcharge $ 0
Paid [ ] Check # Minimum Fee $ 0
Collected by: TOTAL FEE $ 35
DCA State Permit Fee $ 3

U.C.C. F130 (rev. 3/96)

TRINITY
Heating & Air, Inc.

800 Rt. 9 South • Freehold, NJ 07728 • (732) 780-3779 • Fax (732) 780-6671 • TrinityHnA@aol.com

Date: 5/28/04

Township of Brick

To whom it may concern:

Enclosed please find a check in the amount of $ 82 with regard to the permit for Mr. and Mrs. Watson, 1629 Tilford Blvd, Brick
Blk: 825 Lot: 35.

Please send copies to our office and if you have any questions please do not hesitate to contact us.

Thank you for your attention to this matter.

P.O. 113 Watson $82.00

TRINITY
Heating & Air, Inc.
800 Rt. 9 South, Freehold, NJ 07728

UNITED STATES POSTAGE
181 PB9909891
23715 $00.37⁰ MAY 28 04
3720 MAILED FROM ZIP CODE 07710

Township of Brick
401 Chambersbridge Road
Brick, New Jersey 08723

Attention: Building Department

08723+2807

PLUMBING SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
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 35
Work Site Location 1629 Tilford Blvd.
Brick 08724
Owner in Fee Watson
Address
Same As Above
Tele. [redacted]
Contractor Joseph Mastre
Address 48 Sage Rd
Toms River NJ 08753
Tele. (732) 780-3779 Fax (732) 780-0719
Lic. No.
Federal Emp. No.

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 $ 3600

JOB SUMMARY (Office Use Only)

PLAN REVIEW
[ ] No Plans Required
Joint Plan Review Required:
[ ] Building [ ] Electric
[ ] Fire [ ] Elevator
[ ] Plumbing Plans Approved
Date: 12/12/00
Approved by:

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

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Slab				
Rough				
Water				
Sewer				
Fixtures				
Gas Equipment				
Gas Piping				
Solar				
TCO				

C. CERTIFICATION IN LIEU OF OATH

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

Signature — Contractor's Seal

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA (List of all fixtures.)

NO.	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	
	Steam Boiler	
1	Hot Water Boiler O/L	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
	Other	
	Other	
	Other	

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

U.C.C. F130
(rev. 3/96)

[redacted]

ELECTRICAL SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
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 35
Work Site Location 1629 Tilford Blvd
Brick 08724
Owner in Fee/Occupant WATSON
Address
Same As Above
Tele. [redacted]
Contractor Trinity Heating & Air Inc
Address 500 US / Hwy 9 / South
Freehold NJ 07728
Tele. (732) 780-3779 Fax (732) 780-6671
Lic. No. 35631
Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
[ ] Pole/Pad # [ ] Temporary [ ] Other
Building Occupied as Utility Co.
Est. Cost of Elec. Work $ 200

JOB SUMMARY (Office Use Only)

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

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

Temp. Cut-in-Card Date Issued
Final Cut-in-Card Date Issued

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

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.

William T Jones
Applicant's Signature/Contractor's Seal and Signature

[ ] Licensed Electrical Contractor [ ] Exempt Applicant

D. TECHNICAL SITE DATA

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	
		.....	
		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	
1		Replace 6'L Bulb	
		.....	

Administrative Surcharge	$	
Minimum Fee	$	
DCA Training Fee	$	
TOTAL FEE	$	

Printed on Recycled Paper

UCC F120
(rev 3/96)

FIRE SUBCODE TECHNICAL SECTION

Date Received
Date Issued
Control #
Permit # n/A

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

Block 603 Lot 6
Work Site Location 665 Colonial Arms Rd
Union 07083
Owner in Fee O'Reilly
Address
Same as above
Tele. [redacted]
Contractor Trinity Heating & Ave
Address 800 US Hwy 9 South
Freehold NJ 07728
Tele. (732) 780-3779 Fax (732) 780-6671
Lic. No.
Federal Emp. No. 223292324

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed _____
Constr. Class Present _____ Proposed _____
Heating Systems [ ] New [ ] Existing [ ] HVAC
Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar
[ ] Other _____
Location: _____
Total Cost of Fire Protection Work $ N/C

Fire Alarm System
New [ ] Existing [ ]
Location of Panel: _____
Fire Suppression/Standpipe System
New [ ] 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				
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.

Thomas Pulaski
Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:
Replace oil Boiler
Water Supply Source _____
Method of Alarm/Suppression System Supervision _____

Storage Tanks
Type: [ ] Flammable Liquid [ ] Combustible Liquid
[ ] LPG [ ] LNG Capacity ____ Fuel ____

Alarm Systems [ ] 110v Interconnected **NUMBER**
[ ] System

	NUMBER	FEE (Office Use Only)
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		
Pre-action Valves		
Sprinkler Heads (Dry and Wet)		
Standpipes		
Pre-engineered Systems		
Wet Chemical		
Dry Chemical		
CO_2 Suppression		
Foam Suppression		
Halon Suppression		
Other _____		
Kitchen Hood Exhaust System		
Smoke Control System		
Gas [ ] or Oil [ ] Fired Appliances		
Other _____		

Administrative Surcharge	$
Minimum Fee	$
DCA Training Fee	$
TOTAL FEE	$

U.C.C. F140
(rev 3/96)

CHIMNEY CERTIFICATION
FOR REPLACEMENT OF FUEL FIRED EQUIPMENT

BLOCK 825 LOT 35 PERMIT # _____

WORK SITE ADDRESS 1629 Tilton Blvd Brick 08724

Applicant Watson

Certifying Individual _____ Company Trinity Heating & Air

Address 800 US Hwy 9 South (Street) Freehold NJ 07728
Street City State Zip Code

Tel. (732) 780-3779

Check the Appropriate Box

Type of Replacement:

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

Existing Vent/Chimney:

- [ ] B Label Vent
- [ ] L Label Vent
- [ ] Masonry Chimney — Tile Lined
- [ ] Flexible Liner
- [ ] Power Vent/Exhauster
- [X] Other Terra Cotta.

PLEASE SIGN ONE OF THE FOLLOWING CERTIFICATION STATEMENTS

CERTIFICATION

For Oil to Gas Conversions:

I herby certify that the chimney/vent is free and clear of obstruction and is substantially clean of residue from its previous use serving an oil appliance. I further certify that the chimney/vent is appropriately lined and sized for the appliance being installed.

_____ _____
Signature Date

Oil to Oil or Gas to Gas Replacements:

I hereby certify that the existing chimney/vent is free and clear of obstruction. I further certify that the existing chimney/vent is appropriately lined and sized for the appliance being installed.

Thomas Vaubel 11-26-02
Signature Date

Certification Not Submitted:

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

_____ _____
Signature Date

Direct Vent Appliance:

No certification required:

_____ _____
Signature Date

THIS FORM MUST BE RETURNED TO THE CODE ENFORCEMENT OFFICE PRIOR TO FINAL INSPECTION.

U.C.C. F370
(rev. 3/96)

WEIL-McLAIN

WTGO

SERIES 2

GOLD OIL

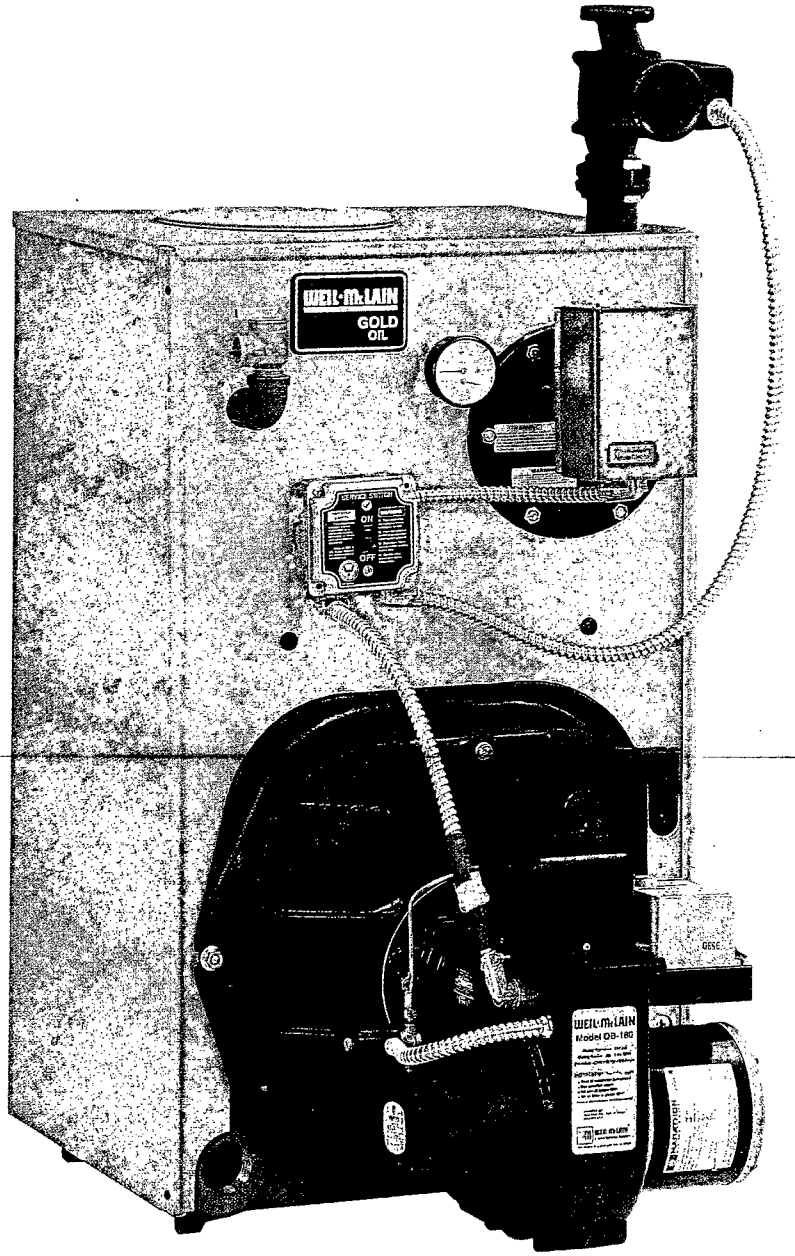
WATER BOILER

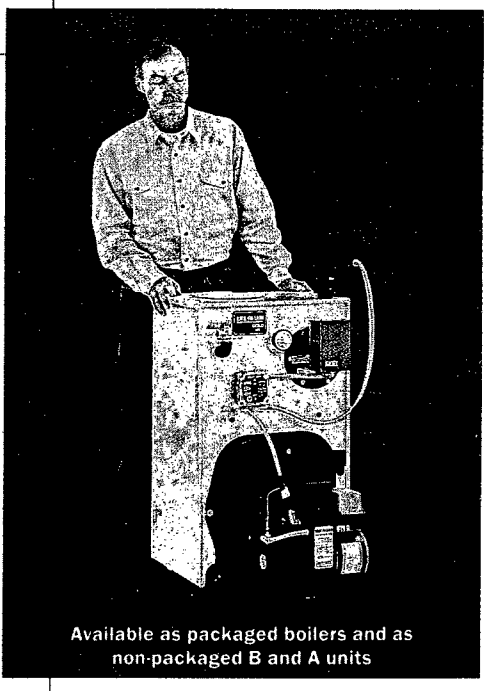
With Tankless Heater Opening

7 sizes

100,000 To 263,000 BTU/Hr. Hot Water

.95 To 2.55 GPH





Available as packaged boilers and as non-packaged B and A units

- ☐ Easy to Install and Setup
- ☐ Easy to Service and Clean
- ☐ Made with Weil-McLain Quality

WEIL-McLAIN GOLD OIL

WTGO RATINGS

I-B-R DOE

Boiler Model Number	I-B-R Burner Capacity GPH*	DOE Heating Capacity† MBH**	Net I-B-R Ratings-Water+ MBH**	DOE Seasonal Efficiency % (AFUE)	Minimum I-B-R Chimney Size		
					Rectangular Inches	Round Inches	Height Feet
▲-WTGO-3	.95	115	100	85.0	8×8	6	15
▲-WTGO-4	1.25	151	131	84.6	8×8	6	15
▲-WTGO-5	1.50	182	158	84.8	8×8	7	15
▲-WTGO-6	1.80	218	190	84.9	8×8	7	15
▲-WTGO-7	2.05	249	217	85.1	8×8	7	15
▲-WTGO-8	2.30	274 ■	238	–	8×12	7	20
▲-WTGO-9	2.55	303 ■	263	–	8×12	7	20

▲Substitute "P" for package boiler (WTGO-3 through WTGO-6 only). Substitute "B" for boiler-burner unit or "A" for boiler only (3 through 9).

* No. 2 fuel oil – Commercial Standard Spec. CS75-56. Heat value of oil – 140,000 BTU/Gal.

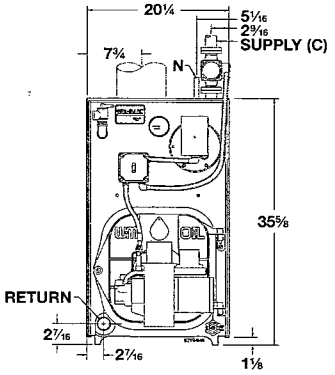
† Based on standard test procedures prescribed by the United States Department of Energy at combustion condition of 13% CO_2 and –0.02" W.C. draft.

**MBH refers to thousands of BTU per hour.

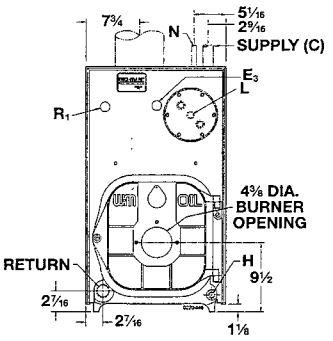
■ I-B-R gross ouptut.

+ Net I-B-R ratings are based on net installed radiation of sufficient quantity for the requirements of the building and nothing need be added for normal piping and pickup. Water ratings are based on a piping and pickup allowance of 1.15. An additional allowance should be made for unusual piping and pickup loads. Consult a Weil-McLain representative.

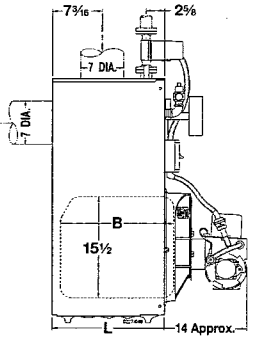
DIMENSIONS



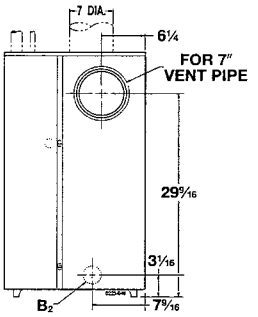
P-WTGO FRONT



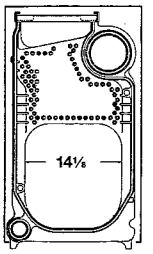
B & A FRONT



SIDE



BACK



INTERMEDIATE

Boiler Model Number	Supply (C)		Front Return All Units	Dimensions Inches		Approx. Shipping Wt. Lbs.*
	P-WTGO (in Circulator)	B & A-WTGO		B	L	
WTGO-3	1¼"	1½"	1½"	13½	16⅞	605
WTGO-4	1¼"	1½"	1½"	13⅝	16⅞	660
WTGO-5	1½"	1½"	1½"	16⅞	20	775
WTGO-6	1½"	1½"	1½"	20	23⅛	875
WTGO-7	–	1½"	1½"	23⅛	26¼	950
WTGO-8	–	1½"	1½"	26¼	29⅜	1055
WTGO-9	–	1½"	1½"	29⅜	32½	1155

CRATE MEASUREMENTS – Height: 39"; Width: 23"; Length: P-3 & 4: 37"; P-5 & 6: 43"; A & B – 3 & 4: 27"; A & B-5 & 6: 33".

*Weights based on P units (3 through 6) and B units with all components (7 through 9).

CONTROL TAPPINGS

Location	Size Inches	Control
B_2	1½	Alternate Return – B and A Units Only
E_3	¾	Pressure-Temperature Gauge
H	¾	Drain Valve
L*	¾	High Limit/Circulator Control
N	½	Piping to Expansion Tank or Automatic Air Vent
R_1	¾	Relief Valve

*In tankless heater plate or heater cover plate.

STANDARD EQUIPMENT

Limited Lifetime Warranty on Boiler Sections
Factory Water-Tested
Factory Assembled Cast Iron Sections with the following parts installed
- **Tankless Heater (P units) or Heater Opening Cover Plate (B & A units)**
- **Insulated Steel Jacket with Cap***
- **Aluminized Steel Flue Collector Hood with Flue Cap on Top Outlet**
- **Swing-Away Burner Mounting Door**
- **Refractory Blanket and Target Wall in Combustion Area**

**Jacket and collector hood not assembled on 7, 8 and 9 section blocks*

Circulator (Taco 007, B&G NRF-22 or Grundfos UP15) – P units only – wired but not installed
High Efficiency Flame Retention Oil Burner (Weil-McLain QB, Beckett AFG or Carlin EZ) – P and B units only
High-Low Limit Control with Circulator Relay – P units only
High Limit Control with Circulator Relay – B and A units only*
Electrical Junction Box with Wiring Harnesses
Service Switch and Junction Box Cover Plate
Built-in Air Separator
Two Vent Pipe Brackets
Combination Pressure-Temperature Gauge
30 P.S.I. ASME Relief Valve (boiler sections tested for 50 P.S.I. working pressure)
Drain Valve
Balanced Draft Damper

*High-Low limit furnished when heater is ordered.

ADDITIONAL EQUIPMENT

Weil-McLain 5-Year Homeowner Protection Plan
Weil-McLain Indirect-Fired Water Heaters
Tankless Heaters and Controls
Circulators – Taco 110 and B&G 100
Two-Stage Fuel Unit

In the interest of continual improvement in products and performance, Weil-McLain reserves the right to change specifications without notice.

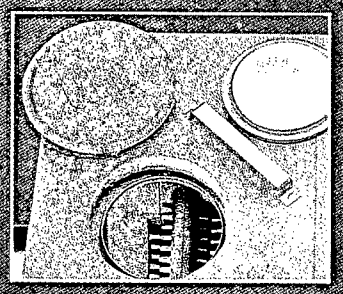
WEIL-McLAIN
A United Dominion Company

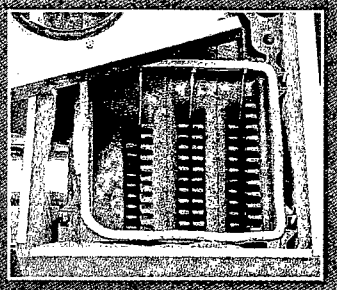
Weil-McLain
500 Blaine Street
Michigan City, IN 46360-2388

Form No. C-751R3(596)

Litho in U.S.A.

INSPECTION AND CLEANING





Flueways can be visually inspected without taking apart the vent pipe by removing the jacket cap and flue outlet cap from the unused flue outlet.

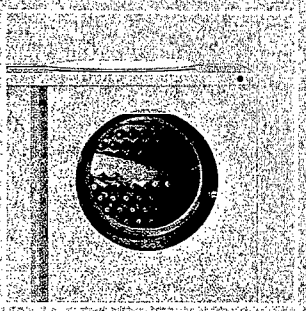
Removing the flue collector hood provides complete access to all flueways for fast, thorough cleaning.

And the placement of the heat pins provides specific paths for flue brush travel. No stuck brushes!

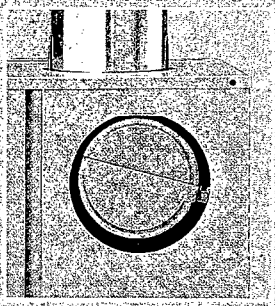
RECESSED TARGET WALL

The target wall fits securely into the recess in the wide back section – it is protected from flue brush damage and will not tip. The target wall is made of high temperature ceramic fiber for better performance and longer life.

BACK OR TOP VENTING



Back outlet



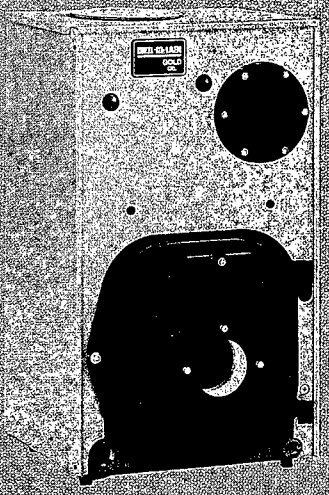
Flue cap on back outlet for top venting

The WTGO has *two* flue outlets - one in back, one on top – to provide complete venting flexibility.

The boiler is shipped ready for back venting with an aluminized steel cap on the top flue outlet. If top venting is desired, the flue cap can be quickly removed and attached to the back outlet.

Two special L-brackets are supplied to make it easy to connect flue pipe to either outlet.

NON-PACKAGED UNITS



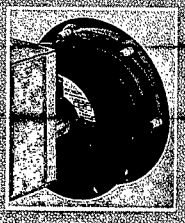
All B and A units are shipped with factory-assembled sections. Three through six section boilers are shipped in a wire-bound crate *with the jacket installed.* The following parts are assembled:

- Burner mounting door
- Flue collector hood and cap
- Target wall and refractory blanket
- Heater opening cover plate

Seven through nine section blocks are skidded for shipment. For easier handling, these units can be separated into two blocks since short draw rods are used in the middle of the assembly.

Individual sections – as well as assembled blocks – are water tested before shipping.

TANKLESS HEATERS



The WTGO features increased tankless heater capacity for up to 33 percent more hot water.

The heater opening incorporates the same captured seal design and elastomer ring as used between boiler sections. In addition the port opening extends beyond the front of the jacket for full visibility.

Boiler Model Number	Heater Number	Intermittent Draw-GPM*
WTGO-3	WT-14	3.25
WTGO-4	WT-14	3.75
WTGO-5	WT-14	4.00
WTGO-6	WT-14	4.25
WTGO-7	WT-20	5.50
WTGO-8	WT-20	5.75
WTGO-9	WT-20	6.00

*Gallons of water per minute heated from 40° to 140°F with 200° boiler water temperature. Tested in accordance with I-W-H Testing and Rating Standard for Indirect Tankless Water Heaters Tested with Boilers.

TAPPINGS: Inlet and outlet – 1/2"; Temperature control – 3/4"

SWING-AWAY BURNER DOOR

The full swing-away burner door provides easy access to the entire combustion area to clean/inspect/service burner and heat exchanger surfaces. If desired, the door can be easily removed from the hinges.

A quick-disconnect plug is provided to disconnect power to the burner when opening the door.

INDIRECT-FIRED WATER HEATERS

Weil-McLain offers a complete line of indirect-fired water heaters for use with the GOLD boiler. These heaters provide high volume hot water and feature efficient operation, fast installation, less maintenance, and long life. Consult a Weil-McLain representative.

WEIL-McLAIN GOLD OIL

Introducing the Weil-McLain WTGO GOLD - a residential hot water boiler with tankless heater opening with all the features installers and homeowners have asked for.

Outstanding performance...innovative design...easier to install and service...top or back venting...limited lifetime warranty - just a few of the advantages that make the WTGO GOLD boiler the industry's best value. And best of all GOLD is made by Weil-McLain, America's leading name in cast iron boilers for over a century.

The WTGO GOLD is available in three models:

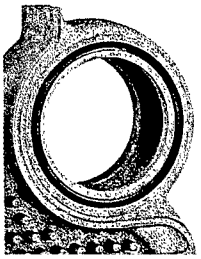
- **P-WTGO PACKAGE.** Factory assembled and wired with jacket, circulator, burner, tankless heater, and controls (WTGO-3 through 6).
- **B-WTGO BOILER-BURNER.** Factory assembled sections with jacket and heater opening plate installed* - burner and controls packed separately (WTGO-3 through 9).
- **A-WTGO BOILER.** Factory assembled sections with jacket and heater opening plate installed* - controls packed separately (WTGO-3 through 9).

**Jacket not installed on B and A - WTGO-7 through 9).*

CAST IRON SECTIONS – CAPTURED SEALS

Boiler sections are made of cast iron for efficiency, durability and long life. It's not uncommon for a Weil-McLain cast iron boiler to last 35 years or more.

Modern elastomer sealing rings in the port openings assure a permanent watertight seal. Because of the elasticity of the material (unlike metal push nipples) the seals prevent leaks caused by thermal expansion and contraction.

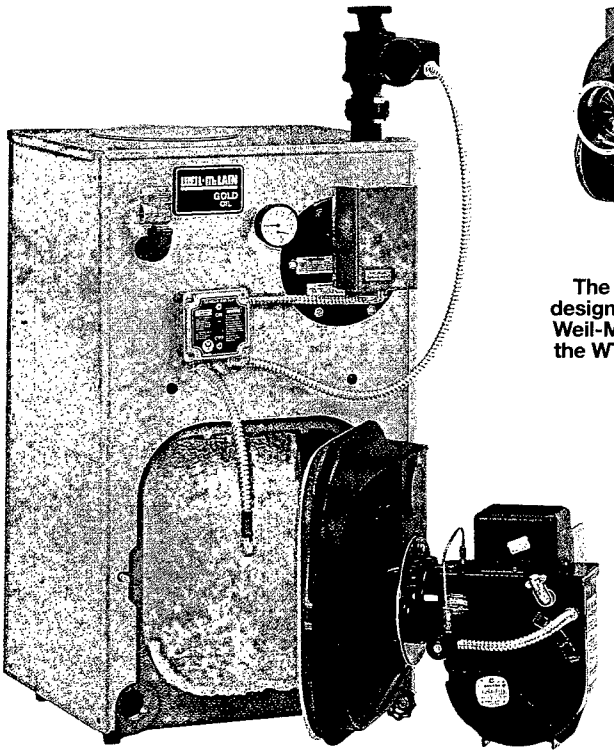


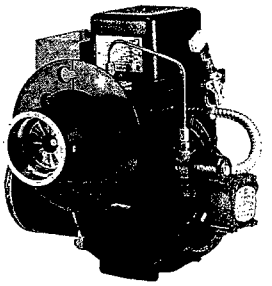
Port openings feature captured seal design - a machined closed groove assures uniform compression of the sealing ring and protects the seal from contaminants.

A special high-temperature rope seal between sections assures a gas-tight assembly.

Heat pins have been designed to maintain high efficiency while making the boiler more tolerant to varying job conditions, as well as easier to clean.

WTGO GOLD FEATURES





The QB GOLD Oil Burner – designed and manufactured b Weil-McLain – is available witl the WTGO-3 through 6.

1. **BACK OR TOP VENTING.** Convertible flue outlet permits either horiz tal or vertical venting.
2. **SWING-AWAY BURNER DOOR.** Hinged door provides easy acces entire combustion area. Opens fully. Easily removed.
3. **EASY INSPECTION.** Flue outlet cap can be quickly removed to insp flueways.
4. **TOP CLEANING.** Removing the flue collector hood exposes all fluew for cleaning. Heat pin placement prevents stuck brushes.
5. **TANKLESS HEATERS.** Increased capacity for more hot water. Captu seal design. Heater opening extends beyond jacket.
6. **CAPTURED SEAL DESIGN.** Protects elastomer sealing rings fi contaminants.
7. **RECESSED TARGET WALL.** Back section design protects new f temperature ceramic fiber from flue brush damage.
8. **FACTORY-WIRED CIRCULATOR.** On packaged boilers the circulato wired with a 30-inch harness, but is not mounted on the boiler to pro location flexibility.
9. **SERVICE SWITCH.** Easy to disconnect power for burner service. J- helps simplify wiring.
10. **HIGH EFFICIENCY.** Over 84% operating efficiency saves fuel.
11. **LIMITED LIFETIME WARRANTY.** Covers cast iron sections.
12. **HOMEOWNER PROTECTION PLAN.** Covers all Weil-McLain supp parts plus labor for five full years. Available through participat installers.