BLOCK 846 LOT 9 QUALIFICATION CODE _____ ADDRESS (SITE) 1701 Forge Pond Rd PERMIT NO. 09-2195 E

CONSTRUCTION PERMIT APPLICATION C09-003048

RECD AUG 24 2009

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

I. IDENTIFICATION

1. Proposed work Site at: 1701 Forge Pond Road
2. Name of Owner in Fee: Weinstein [redacted]
   Address Same (street) (municipality) (zip code)
3. Ownership in Fee: Public _____ Private _____
4. Principal Contractor: AJ Perri Tel. (732) 982-8700
   Address 1138 Pine Brook Road, Tinton Falls, NJ 07724
   License No. or, if new home, Builder Reg. No. 13VH00346300 Exp. Date _____
   Federal Employee No. [redacted] Fax (732) 982-8715
5. Architect or Engineer: _____ Tel. (____) _____
   Address _____ Contact: _____
6. Responsible Person in Charge once Work has Begun: Greg Johnston
   Tel. (____) _____ Fax (____) _____

Sewer Service
Public _____
Private _____

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$		
2. Electrical		40 ✓	
3. Plumbing		40 ✓	
4. Fire Protection			
5. Elevator Devices			
6. Subtotal	$		
7. Less 20% for State Plan Review			
8. Subtotal	$		
9. State Permit Surcharge Fee		19	
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other		90 ✓	
13. TOTAL	$		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure ft.	
3. Area — Largest Floor sq. ft.	
4. New Building Area sq. ft.	
5. Volume of New Structure cu. ft.	
6. Construction Classification	
7. Total Land Area Disturbed sq. ft.	
8. Flood Hazard Zone	
9. Base Flood Elevation ft.	
10. Wetlands yes	
no	
11. Max. Live Load	
12. Max. Occupancy Load	

II. PROPOSED WORK

OPTIONAL (for office use only)

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. ☐ a. Repair									
☐ b. Alteration									
☐ c. Renovation									
☐ d. Reconstruction									
5. ☐ Fire Protection									
6. ☒ Plumbing	4000			8-27-09		Bd			
7. ☒ Electrical	4000				8-27-09	GS			
8. ☐ Elevator Devices									
9. ☐ Asbestos Abat. Subch. 8									
10. ☐ Lead Hazard Abatement									
11. ☐ Demolition									
TOTAL COSTS	9000								

VII. DESCRIPTION OF BUILDING USE

A. RESIDENTIAL
1. State Specific Use:
2. Use Group:
3. Change in Use Group, Indicate Former:
4. No. of dwelling units:

	All Units	Income-restricted
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:

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
10. ☐ Swimming Pools, Spas and Hot Tubs

Called 9/1/09

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. 5:23-2.15(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 Greg Johnston

Address A.J. Perri
1138 Pine Brook Rd.
Tinton Falls, NJ 07724

Telephone ( ) 1-800-287-2164

Signature Greg Johnston 36-427609-7

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

CONSTRUCTION PERMIT

Date Issued 9/10/09
Control # C-09-003048
Permit # 09-3146

IDENTIFICATION Block 846 Lot 9 Qualifier

Work Site Location 1701 FORGE POND RD Brick Township, NJ

Owner in Fee WEINSTEIN, STANLEY P. & EILEEN M.
1701 FORGE POND RD. BRICK NJ 08724

Telephone: [redacted]

Contractor AJ PERRI PLUMBING
Address 1138 PINE BROOK ROAD TINTON FALLS NJ 07724

Telephone: (732) 747-3131
Lic. No. or Bldrs. Reg. No. 12323
Federal Employee No. [redacted]

Is hereby granted permission to perform the following work:

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

DESCRIPTION OF WORK:
REPLACEMENT A/C

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

Estimated Cost of Work $10,900

Construction Official

9-27-09
Date

PAYMENTS (Office Use Only)	
Building	$0
Electrical	$40
Plumbing	$40
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$19
CO Fee	
Other	$0
Total	$99
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:

09/10/09 10:52AM 0013588310
SERV.001
#2195
ELECTRIC $40.00
PLUMBING $40.00
OTHER $19.00
CHECK $99.00

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.

Brick Township
401 Chambersbridge Rd
Brick, NJ 08723

Date Issued 10/14/2009
Control Number C-09-003048
Permit Number 09-2195
Permit Issue Date 09/10/2009
Certificate Number 09-2195

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Work Site Location: 1701 FORGE POND RD Brick Township, NJ Block: 846 Lot: 9 Qual:

Owner in Fee: WEINSTEIN, STANLEY P. & EILEEN M.

Owner Address: 1701 FORGE POND RD. BRICK NJ 08724

Telephone: [redacted]

Contractor AJ PERRI PLUMBING

Address 1138 PINE BROOK ROAD TINTON FALLS NJ 07724

Telephone: (732) 747-3131 Fax: (732) 982-8715

License Number or Builders Registration Number: 12323 Federal Emp. Numb[redacted]

Home Warranty Number:

Type of Warranty Plan: ☐ State ☐ Private

Use Group: R-5 Construction Classification:

Maximum Live Load: 0 Maximum Occupancy Load: 0

Description of Work/Use: REPLACEMENT A/C

Certificate Comments:

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

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

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

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

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

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

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

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

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

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

Construction Official

Fee: $0.00
Check Number:
Collected By:

Date Printed: 10/14/2009 U.C.C. F260 (rev. 08/05)

951190

ELECTRICAL SUBCODE
TECHNICAL SECTION

2.0

Date Received Control # 09-2195

Date Issued Permit # 9/10/09

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

Block 846 Lot 9 Qualification Code

Work Site Location 1701 Forge Pond Rd. Brick 08724

Owner in Fee Weinstein

Address same

[redacted]

Address 1138 Pine Brook Road Tinton Falls, NJ 07724

Tel (732) 982-8700 FAX (732) 982-8715

Contractor License No. Electric License # 13296B

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 4,000.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW

Date Initial

[X] No Plans Required 8-27-09 RS

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[ ] Elec. Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: 10-14-9 AS

Approved by:

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service Final	MU Event 10-7-09		10/9/09	CD
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.

R. Hola

Applicant's Signature/Contractor's Seal and Signature

[V] Licensed Elec. Contractor [ ] Certif'd Landscape Irrigation Cont'r [ ] 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	
1	7.3	KW Central A/C Unit	
1	7.3	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. 07/03) 1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

AJ 019 Rev 11 06

95/190

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 09-2195

Date Issued / Permit # 9/10/09

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

Block 846 Lot 9 Qualification Code ____

Work Site Location 201 Forge Pond Rd. Brick 08724

Owner in Fee Weinstein

Address Same

Tel [redacted]

Cont J PERRI, INC.

Address 9 JOHNSON STREET
MONMOUTH BEACH, NJ 07750

Tel (732) 982-8700 FAX (732) 982-8715

Contractor License No. 12566

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 $ 10,300.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[✓] Plumbing Plans Approved

Date: 8-27-09

Approved by: ____

SUBCODE APPROVAL

[ ] CO [ ] CCO [✓] CA

Date: 10-6-09

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			10/5/09	

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 (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	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks ____	
1	Other A/C unit	
1	Other Air handler	

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

U.C.C. F130 (rev. 01/04)

1 White = Inspector Copy 2 Canary = Office Copy 3 Pink = Office Copy 4 Gold = Applicant Copy

AJ 020 Rev 2 09

95/190

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received / Control # 09-2195

Date Issued / Permit # 9/10/09

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

Block 846 Lot 9 Qualification Code

Work Site Location 201 Forge Pond Rd. Brick 08724

Owner in Fee Weinstein

Address Same

Tel ([redacted]

Contractor J PERRI, INC.

Address 9 JOHNSON STREET
MONMOUTH BEACH, NJ 07750

Tel (732) 982-8700 FAX (732) 982-8715

Contractor License No. 12566

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 $ 10,300.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[✓] Plumbing Plans Approved

Date: 8-27-09

Approved by: RJ

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by: RJ

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				

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 (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	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks	
1	Other AC unit	
1	Other Air handler	

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

U.C.C. F130 (rev. 01/04)

1 White = Inspector Copy 2 Canary = Office Copy
3 Pink = Office Copy 4 Gold = Applicant Copy

AJ 020 Rev 2 09

95/190

PLUMBING SUBCODE
TECHNICAL SECTION

Date Received Control # 09-2195

Date Issued Permit # 9/10/09

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

Block 8416 Lot 9 Qualification Code ____

Work Site Location 1201 Forge Pond Rd. Brick 08724

Owner in Fee Weinstein

Address Same

Tel ([redacted]

Contractor MICHAEL J. PERRI T/A AJ PERRI, INC.

Address 9 JOHNSON STREET
MONMOUTH BEACH, NJ 07750

Tel (732) 982-8700 FAX (732) 982-8715

Contractor License No. 12566

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 $ 10,300.-

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[ ] No Plans Required

Joint Plan Review Required:

[ ] Building [ ] Electric

[ ] Fire [ ] Elevator

[✓] Plumbing Plans Approved

Date: 8-27-09

Approved by: ____

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: ____

Approved by: ELJ

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 ____				

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 (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	
	LPGas Tank	
	Steam Boiler	
	Hot Water Boiler	
	Sewer Pump	
	Interceptor/Separator	
	Backflow Preventer	
	Greasetrap	
	Sewer Connection	
	Water Service Connection	
	Stacks ____	
1	Other A/C unit	
1	Other Air handler	

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

95190

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received / Control # 09-2195

Date Issued / Permit # 9/10/09

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

Block 846 Lot 9 Qualification Code _____

Work Site Location 1701 Forge Pond Rd, Brick 08724

Owner in Fee Weinstein

Address Same

[redacted]

Tel [redacted]

Contractor A.J.Perri, Inc.

Address 1138 Pine Brook Road, Tinton Falls, NJ 07724

Tel (732) 982-8700 FAX (732) 982-8715

Contractor License No. Electric License # 13296B

Federal Emp. No. _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present _____ Proposed _____

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

Building Occupied as _____ Utility Co. _____

Est. Cost of Elec. Work $ 4,000.-

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

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

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
1		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	
1	7.3	KW Central A/C Unit	
1	7.3	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 $ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required Date 8-27-09 Initial AS

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[ ] Elec. Plans Approved

Date: _____

Approved by: _____

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date: _____

Approved by: _____

INSPECTIONS Type:	Dates (Month/Day) Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO			8-27-9	
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 _____

951190

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received Control # 09-2195

Date Issued Permit # 9/10/09

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

Block 846 Lot 9 Qualification Code

Work Site Location 1701 Forge Pond Rd. Brick 08724

Owner in Fee Weinstein

Address [redacted]

Tel

Cont

Address 1138 Pine Brook Road
Tinton Falls, NJ 07724

Tel (732) 982-8700 FAX (732) 982-8715

Contractor License No. Electric License # 13296B

Federal Emp. No.

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Utility Co.

Est. Cost of Elec. Work $ 4,000.-

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

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

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QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
		Receptacles	
		Switches	
		Detectors	
1		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	
1	7.3	KW Central A/C Unit	
1	7.3	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 $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

Date Initial

[X] No Plans Required 8-27-09 MS

Joint Plan Review Required:

[ ] Building [ ] Plumbing

[ ] Fire [ ] Elevator

[ ] Elec. Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

[ ] CO [ ] CCO [ ] CA

Date:

Approved by:

INSPECTIONS — Dates (Month/Day)

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO			8-27-09	
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

A.J. PERRI, INC.

78372

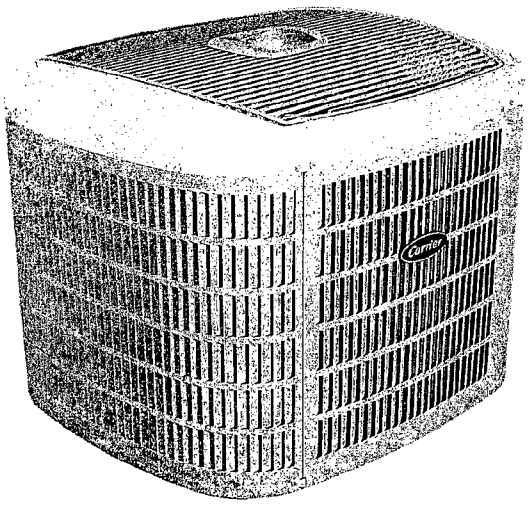
DATE	INVOICE NO.	COMMENT	AMOUNT	DISCOUNT	NET AMOUNT
9/1/2009	9s1190	Weinstein - 1101 Forge Pond Rd.	$99.00	$0.00	$99.00
		Block - 846 Lot - 9			
9/2/2009	78372		$99.00	$0.00	$99.00
BRICK	Brick Township			**TOTAL**	

24ANA124

24ANA1
Infinity™ 21 Series Air Conditioner with Puron® Refrigerant
2 Through 5 Nominal Tons (Size 24 To 60)

Carrier
Turn to the Experts.

Product Data



Puron. INFINITY

Carrier's Air Conditioners with Puron® refrigerant provide a collection of features unmatched by any other family of equipment. The 24ANA1 has been designed utilizing Carrier's Puron refrigerant. The environmentally sound refrigerant allows you to make a responsible decision in the protection of the earth's ozone layer.

As an Energy Star® Partner, Carrier Corporation has determined that this product meets the Energy Star® guidelines for energy efficiency. Refer to the combination ratings in the Product Data for system combinations that meet Energy Star® guidelines.

INDUSTRY LEADING FEATURES / BENEFITS

Energy Efficiency

- 14.5-21 SEER/11.1-15 EER

New Aesthetic Design

- WeatherArmor Ultra™ Cabinet
  - — Baked on powder paint
  - — Steel louver coil guard
  - — Color matched ceramic coated cabinet screws

Extra Quiet Operation

- Silencer System II™ for sound as low as 72 dBA
  - — Quiet mount split post compressor grommets
  - — Exclusive Silencer Top design
  - — Electronic ECM ball bearing outdoor condenser fan motor
  - — Forward-swept condenser fan blade
  - — Compressor sound hood
  - — Laminated steel compressor mounting plate

Reliability, Quality and Toughness

- Two-Stage scroll compressor
- Field-installed 16 cu. in. filter drier
- Back-seating service valves
- High pressure switch
- Low pressure switch
- Internal pressure relief valve
- Internal thermal overload

Controls and Diagnostics

- Infinity™ control (Dedicated A,B,C,D only)
- Utility Interface Connection
- Up to 18 point diagnostic capability

Applications

- Long line - up to 250 ft. total equivalent length. See Long Line Guideline for more information.
- Low ambient (down to 0°F) with complete Infinity system.

Limited Warranty

- 10-year limited warranty on compressor
- 5-year limited warranty on all parts

MODEL NUMBER NOMENCLATURE

1	2	3	4	5	6	7	8	9	10	11	12	13
N	N	A	A	A/N	N	N	N	A/N	A/N	A/N	N	N
2	4	A	N	A	1	2	4	A	0	0	3	0
Product Series		Product Family	Tier	Major Series	SEER	Cooling Capacity		Variations	Open	Open	Voltage	Minor Series
24=AC		A=RES AC	N=Infinity Series	A=Puron	1=21 SEER (Nominal)			A=Standard	0=Not Defined	0=Not Defined	3=208/230–1	0, 1, 2...

Puron™ the environmentally sound refrigerant

IdealHumidity

ARI PERFORMANCE CERTIFIED™ ARI Standard 210/240 Unitary Air Conditioners

ISO 9001:2000 QMI REGISTERED

ENERGY STAR PARTNER

c UL us

As an Energy Star® Partner, Carrier Corporation has determined that this product meets the ENERGY STAR® guidelines for energy efficiency.

Refer to the combination ratings in Product Data for system combinations that meet Energy Star guidelines.

24ANA1

STANDARD FEATURES

Feature	24–30	36–30	48–30	60–30
Puron® Refrigerant	X	X	X	X
Up to 21 SEER	X			
Infinity Control System Only	X	X	X	X
Two Stage Scroll Compressor	X	X	X	X
Silencer System II™	X	X	X	X
WeatherArmor Ultra™	X	X	X	X
Field–Installed 16 cu. in. Filter Drier	X	X	X	X
Back Seating Service Valves	X	X	X	X
High Pressure Switch	X	X	X	X
Low Pressure Switch	X	X	X	X
Internal Pressure Relief Valve	X	X	X	X
Internal Thermal Overload	X	X	X	X
Long Line capability with hard shut–off TXV	X	X	X	X
Low Ambient capability to 0° F w/Infinity Control	X	X	X	X
Up to 18 point Diagnostics	X	X	X	X
Utility Interface Connection	X	X	X	X

PHYSICAL DATA

UNIT SIZE SERIES	24–30	36–30	48–30	60–30
Operating Weight (lb)	330	330	330	350
Shipping Weight (lb)	367	367	367	387
Compressor Type	2–Stage Scroll			
REFRIGERANT	Puron® (R–410A)			
Control	TXV (Puron® Hard Shutoff)			
Charge (lb)	14.0	12.75	11.75	11.75
COND FAN	Forward Swept Propeller Type, Direct Drive			
Air Discharge	Vertical			
Air Qty (CFM)	2850/3250	2900/3450	3300/3800	3800/4250
Motor HP	1/5			
Motor RPM	625/735	582/690	660/765	742/828
COND COIL				
Face Area (Sq ft)	24.40			
Fins per In.	20			
Rows	2			
Circuits	8			
VALVE CONNECT. (In. ID)				
Vapor	7/8			
Liquid	3/8			
REFRIGERANT TUBES* (In. OD)				
Vapor (0–80 Ft Tube Length)	7/8	7/8	7/8	1–1/8
Liquid (0–80 Ft Tube Length)	3/8			

* For tubing sets between 80 and 200 ft. horizontal or 20 ft. vertical differential (250 ft. Total Equivalent Length), consult the Long Line Guideline.

Note: See unit Installation Instruction for proper installation.

VAPOR LINE SIZING AND COOLING CAPACITY LOSS PURON REFRIGERANT 2-STAGE AIR CONDITIONER APPLICATIONS

Unit Nominal Size (Btuh)	Acceptable Liquid Line Diameters (in. O.D.)	Acceptable Vapor Line Diameters (In. O.D.)	Standard Application			Long Line Application Requires Accessories						
			25	50	80	80+	100	125	150	175	200	225	250
24000 2–Stage Puron AC	3/8	5/8	0	1	1	1	2	3	3	4	4	5	6
		3/4	0	0	0	0	0	1	1	1	1	1	2
		7/8	0	0	0	—	—	—	—	—	—	—	—
36000 2–Stage Puron AC		5/8	1	2	4	4	5	6	7	9	10	11	13
		3/4	0	0	1	1	1	2	2	3	3	4	4
		7/8	0	0	0	0	0	1	1	1	1	2	2
48000 2–Stage Puron AC		3/4	0	1	2	2	3	4	5	5	6	7	8
		7/8	0	0	1	1	1	2	2	2	3	3	4
60000 2–Stage Puron AC		3/4	1	2	4	4	5	6	7	9	10	11	12
		7/8	0	1	2	2	2	3	4	4	5	5	6
		1–1/8	0	0	0	0	1	1	1	1	1	1	2

Standard Length = 80 ft. or less total equivalent length

NOTE: Dashes (–) represent insufficient oil return to the compressor in heating mode. Use smaller tube diamter in this area.

Applications in this area are long line. Accessories are required as shown recommended on Long Line Application Guidelines

Applications in this area may have height restrictions that limit allowable total equivalent length, when outdoor unit is below indoor unit See Long Line Application Guidelines

LONG LINE APPLICATION: An application is considered "Long line" when the total equivalent tubing length exceeds 80 ft. or when there is more than 20 ft. vertical separation between indoor and outdoor units. These applications require additional accessories and system modifications for reliable system operation.

The maximum allowable total equivalent length is 250 ft. The maximum vertical separation is 200 ft. when outdoor unit is above indoor unit, and 80 ft. when the outdoor unit is below the indoor unit. Refer to Accessory Usage Guideline below for required accessories. See Long Line Application Guideline for required piping and system modifications. Also, refer to the table below for the acceptable vapor tube diameters based on the total length to minimize the cooling capacity loss.

ACCESSORIES

KIT NUMBER	KIT NAME	24–30	36–30	48–30	60–30
KSASF0101AAA	SUPPORT FEET	X	X	X	X
KSATX0201PUR	TXV (HSO)	X			
KSATX0301PUR	TXV (HSO)		X		
KSATX0401PUR	TXV (HSO)			X	
KSATX0501PUR	TXV (HSO)				X

X = Accessory

Infinity Controls	DESCRIPTION
SYSTXCCUIZ01–A	Infinity System Zone Control User Interface
SYSTXCCUID01–A	Infinity System Non–Zone Control User Interface

Note: These Infinity series units must use "–A" revision or later to operate properly

ACCESSORY USAGE GUIDELINE

Accessory	REQUIRED FOR LOW–AMBIENT COOLING APPLICATIONS (0°F to 55° F)	REQUIRED FOR LONG LINE APPLICATIONS* (Over 80 Ft.)	REQUIRED FOR SEA COAST APPLICATIONS (Within 2 miles)
Crankcase Heater	Standard	Standard	Standard
Evaporator Freeze Thermostat	‡ Standard with Infinity Control	No	No
Accumulator	No	No	No
Compressor Start Assist Capacitor and Relay	Not required since compressor always starts unloaded	Not required since compressor always starts unloaded	Not required since compressor always starts unloaded
Low Ambient Control	‡ Standard with Infinity Control	No	No
Support Feet	Recommended	No	Recommended
Liquid Line Solenoid Valve	No	See Long Line Application Guideline	No
Puron Hard Shutoff TXV	Yes†	Yes†	Yes†
Ball Bearing Fan Motor	Standard	Standard	Standard
Winter Start Control	‡ Standard with Infinity Control	No	No

* For tubing line sets between 80 and 200 ft. and/or 20 ft. vertical differential (250 ft. Total Equivalent Length), refer to Residential Split–System Longline Application Guideline.

† Required on all indoor units. Standard on all new Puron fan coils and furnace coils.

‡ Standard with Infinity Control (non–communicating thermostat is not allowed except for emergency use).

Accessory Description and Usage (Listed Alphabetically)

1. Support Feet

Four stick–on plastic feet that raise the unit 4 in. above the mounting pad. This allows sand, dirt, and other debris to be flushed from the unit base, minimizing corrosion.

Usage Guideline:

Suggested in the following applications:

Coastal installations.

Windy areas or where debris is normally circulating.

Rooftop installations.

For improved sound ratings.

2. Thermostatic Expansion Valve (TXV)

A modulating flow–control valve which meters refrigerant liquid flow rate into the evaporator in response to the superheat of the refrigerant gas leaving the evaporator.

Kit includes valve, adapter tubes, and external equalizer tube. Hard shut off types are available.

Usage Guideline:

ELECTRICAL DATA

UNIT SIZE – SERIES	V/PH	OPER VOLTS*		COMPR		FAN	MCA	MIN WIRE SIZE†	MIN WIRE SIZE†	MAX LENGTH (FT)‡	MAX LENGTH (FT)‡	MAX FUSE** or CKT BRK AMPS
		MAX	MIN	LRA	RLA	FLA		60°C	75°C	60°C	75°C	
24–30	208/230–1	253	187	52.0	10.3	1.1	13.9	14	14	57	54	20
36–30				82.0	16.7	2.2	23.1	12	12	54	52	30
48–30				96.0	21.2	2.2	28.7	10	10	69	66	40
60–30				118.0	25.6	2.8	34.8	8	10	89	54	50

* Permissible limits of the voltage range at which the unit will operate satisfactorily

† If wire is applied at ambient greater than 30°C (86°F), consult table 310–16 of the NEC (ANSI/NFPA 70). The ampacity of non–metallic–sheathed cable (NM), trade name ROMEX, shall be that of 60°C (140°F) conditions, per the NEC (ANSI/NFPA 70) Article 336–26. If other than uncoated (no–plated), 60 or 75°C (140°F or 167°F) insulation, copper wire (solid wire for 10 AWG or smaller, stranded wire for larger than 10 AWG) is used, consul applicable tables of the NEC (ANSI/NFPA 70).

‡ Length shown is as measured 1 way along wire path between unit and service panel for voltage drop not to exceed 2%.

** Time–Delay fuse.

FLA – Full Load Amps
LRA – Locked Rotor Amps
MCA – Minimum Circuit Amps
RLA – Rated Load Amps

NOTE: Control circuit is 24–V on all units and requires external power source. Copper wire must be used from service disconnect to unit. All motors/compressors contain internal overload protection.

A-WEIGHTED SOUND LEVEL (dBA)

UNIT SIZE – SERIES	STANDARD RATING	TYPICAL OCTAVE BAND SPECTRUM (without tone adjustment)						
		125	250	500	1000	2000	4000	8000
24–30	72–low stage	51.9	59.9	53.8	67.0	54.7	50.0	45.4
	72–high stage	52.9	64.4	58.8	66.5	55.7	50.5	47.4
36–30	72–low stage	51.4	58.4	57.8	62.5	50.2	53.0	46.9
	73–high stage	52.4	54.4	59.3	60.0	53.7	52.0	44.9
48–30	76–low stage	57.4	51.4	56.8	55.0	56.7	50.0	45.9
	75–high stage	57.4	56.4	72.8	62.5	54.7	53.0	47.9
60–30	76–low stage	49.4	58.4	71.3	65.0	56.7	53.0	47.9
	74–high stage	54.9	59.4	68.3	67.5	57.2	54.0	46.9

CHARGING SUBCOOLING (TXV-TYPE EXPANSION DEVICE)

UNIT SIZE–SERIES	REQUIRED SUBCOOLING (F)
24 – 30	11 HIGH STAGE
36 – 30	11 HIGH STAGE
48 – 30	11 HIGH STAGE
60 – 30	11 HIGH STAGE

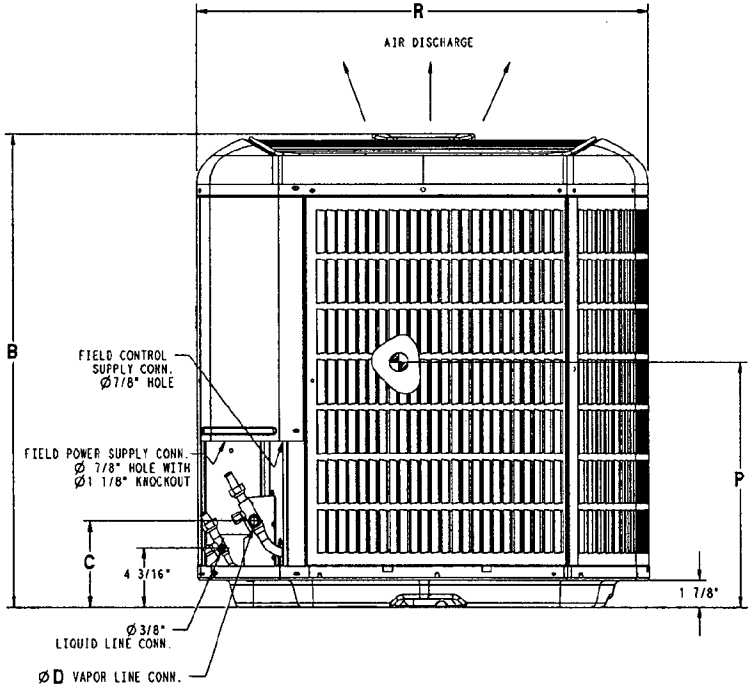
DIMENSIONS

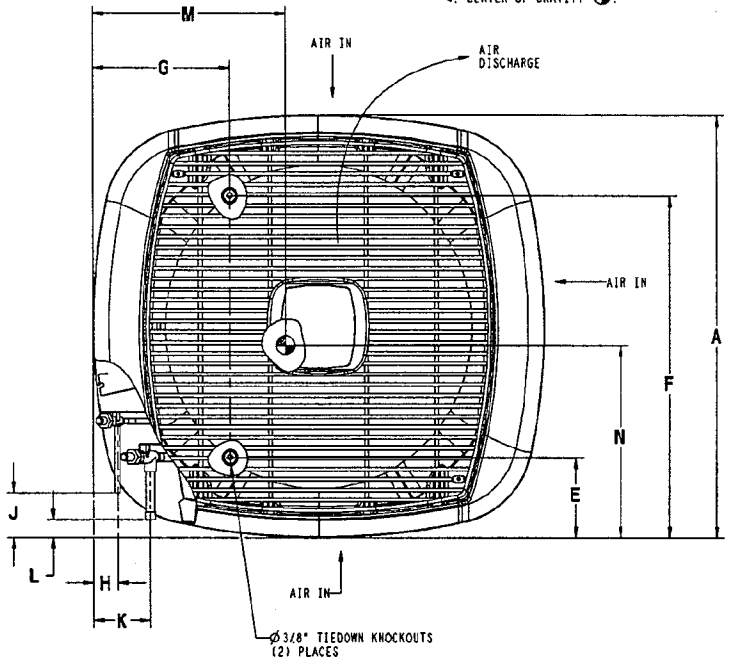
UNIT	SERIES	ELECTRICAL CHARACTERISTICS				A	B	C	D	E	F	G	H	J	K	L	M	N	P	R	OPERATING WEIGHT	SHIPPING WEIGHT	SHIPPING DIMENSIONS (L x W x H)
24ANA124	0	X	0	0	0	35 1/2"	47 5/16"	6 1/4"	7/8"	6 13/16"	28 3/4"	11 5/8"	1 3/4"	3 3/16"	4 1/16"	1 1/8"	19 1/2"	16 3/4"	21"	40"	330#	367#	41 1/8" X 36 5/8" X 51 1/16"
24ANA136	0	X	0	0	0	35 1/2"	47 5/16"	6 1/4"	7/8"	6 13/16"	28 3/4"	11 5/8"	1 3/4"	3 3/16"	4 1/16"	1 1/8"	19 1/2"	16 3/4"	21"	40"	330#	367#	41 1/8" X 36 5/8" X 51 1/16"
24ANA148	0	X	0	0	0	35 1/2"	47 5/16"	6 1/4"	7/8"	6 13/16"	28 3/4"	11 5/8"	1 3/4"	3 3/16"	4 1/16"	1 1/8"	19 1/2"	16 3/4"	21"	40"	330#	367#	41 1/8" X 36 5/8" X 51 1/16"
24ANA160	0	X	0	0	0	35 1/2"	47 5/16"	6 1/4"	7/8"	6 13/16"	28 3/4"	11 5/8"	1 3/4"	3 3/16"	4 1/16"	1 1/8"	18 1/2"	17"	21"	40"	350#	387#	41 1/8" X 36 5/8" X 51 1/16"
		208/230-1-60	230-1-60	208/230-3-60	460-3-60																		

X = YES
O = NO

NOTES:

1. ALLOW 30" CLEARANCE TO SERVICE SIDE OF UNIT, 48" ABOVE UNIT, 6" ON ONE SIDE, 12" ON REMAINING SIDE, AND 24" BETWEEN UNITS FOR PROPER AIRFLOW.
2. MINIMUM OUTDOOR OPERATING AMBIENT IN COOLING MODE IS 55°F. MAX. 125°F.
3. SERIES DESIGNATION IS THE 13TH POSITION OF THE UNIT MODEL NUMBER.
4. CENTER OF GRAVITY ⊕.





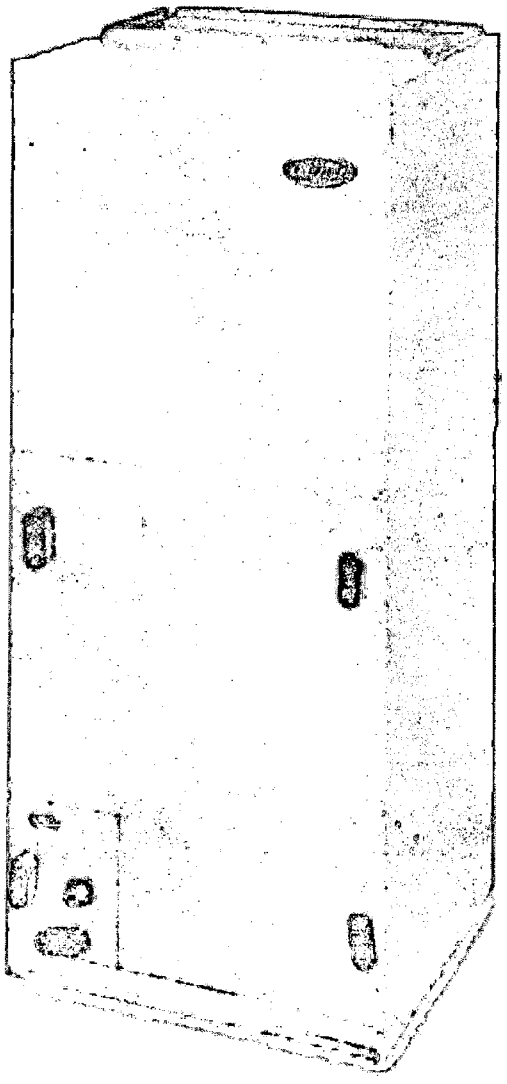
UNIT SIZE	MINIMUM MOUNTING PAD DIMENSIONS
-	29 1/2" X 33"
24,36,48,60	36 1/2" X 40"

FE4ANF002

FE4A, FE5A Communicating Variable-Speed Fan Coil Puron® Refrigerant Sizes 002 thru 006

Carrier®
Turn to the Experts.

Product Data



PREMIUM ENVIRONMENTALLY-SOUND FAN COIL

The latest in technology makes the FE4A and FE5A fan coil models the most advanced air handlers available. With attention to quiet, efficient, and comfortable operation, Carrier has developed a new benchmark for homeowner comfort and ease of installation.

The FE4A and FE5A come with state of the art smart-diagnostics capability. This enables faster troubleshooting, providing ease of service and repair. The FE4A and FE5A also provide a 4-wire hook up with matching outdoor unit and the Infinity™ Control. This makes installation simpler and a lot quicker than with conventional fan coils. The FE4A and FE5A have advanced technology that allows the fan coil to self-configure with a matching outdoor unit and the Infinity™ Control, cutting down on installation time.

The FE4A and FE5A feature Puron® refrigerant (R-410A), the chlorine-free alternate that is the future for the residential heating and cooling industry. The FE4A and FE5A using Puron® refrigerant maximize performance for environmentally sound systems. In addition to environmental safety, these systems are 30 to 40% more efficient than standard heating and cooling systems, thereby combining excellence in efficiency and environmental safety.

The FE4A and FE5A provide these benefits due to Carrier's command of ECM (Electronically Commutating Motor) technology. These motors are extremely efficient at all speeds, and enable the FE4A and FE5A to operate at the correct speed to deliver airflow precisely, ensuring proper performance across a wide range of duct static pressures. This adaptive efficiency also makes installation quality easier to achieve for today's demanding homeowner.

Carrier's command of ECM technology may be most evident in the comfort advantages that an ECM can deliver. For true comfort, the homeowner can achieve command of both temperature and humidity in cooling and heating modes.

Another feature which sets the FE4A and FE5A apart is the factory-installed TXV, which enhances efficiency and provides compressor-protecting operation at all recommended conditions. Grooved copper tubing, louvered aluminum fins, and the large face areas of the FE4A and FE5A refrigerant coils also provide superior efficiency, for high SEER and HSPF performance.

Carrier leads the way in condensate control, a hallmark of these multipoise fan coils. All of these featured components are protected within a rugged, pre-painted metal cabinet lined with super-thick, high-density insulation. For neat, high quality installations the unit exterior features sweat refrigerant connections for simple leak free performance, and multiple electrical entry for both high and low voltage service.

For superior technology and unmatched comfort, the environmentally sound and efficient FE4A and FE5A fan coils can't be beat.

PHYSICAL DATA

ODS CATALOG ORDERING NO.	FIELD–INSTALLED HEAT (KW)	NOMINAL COOLING CAPACITY (BTUH)	DIMENSIONS			SHIPPING WEIGHT
			Height	Width	Depth	
FE4ANF002000	5, 8, 9, 10, 15, 20	18,000 to 36,000	42–11/16	17–5/8	22–1/16	135
FE4ANF003000	5, 8, 9, 10, 15, 18, 20	24,000 to 42,000	53–7/16	21–1/8	22–1/16	150
FE4ANF005000	5, 8, 9, 10, 15, 18, 20, 24, 30	30,000 to 48,000	53–7/16	21–1/8	22–1/16	172
FE4ANB006000	8, 9, 10, 15, 18, 20, 24, 30	36,000 to 60,000	59–3/16	24–11/16	22–1/16	207
FE5ANB004000	5, 8, 9, 10, 15, 18, 20	24,000 to 42,000	59–3/16	24–11/16	22–1/16	200

SPECIFICATIONS

MODEL	FE4A				FE5A
SIZE	002	003	005	006	004
COIL					
Refrigerant Metering Device	Puron® Refrigerant (R–410A) TXV				
TXV Size	2 Ton	3 Ton	4 Ton	4 Ton	3 Ton
Configuration	A	Slope	A	A	A
Rows—Fins/In.	3 / 14.5				
Face Area (Sq Ft)	3.46	3.46	5.93	7.42	7.42
MATCHES OUTDOOR UNIT SIZES					
Nominal Cooling Tons	1.5, 2, 2.5, 3	2, 2.5, 3, 3.5	2.5, 3, 3.5, 4	3, 3.5, 4, 5	2, 2.5, 3, 3.5
FAN					
Air Discharge	Upflow, Downflow, Horizontal				Upflow, Downflow
CFM/Ton (Nominal Clg/Htg)	350+				
Motor HP (ECM)	1/2	1/2	1/2	3/4	3/4
Filter 21–1/2 X	16–3/8	18–7/8	18–7/8	23–5/16	23–5/16
CABINET CONFIGURATION OPTIONS					
	1 – piece	1 – piece	1 – piece	2 – piece	2 – piece

PERFORMANCE DATA

AIRFLOW DELIVERY — COOLING, HEATING, ELECTRIC HEATING MODES

The FE4 and FE5A fan coils will provide airflow at a rate that is requested by the Integrated System User Interface during air conditioning or heat pump heating (without electric heat) modes. The nominal airflow for both heating and cooling modes is 350 cfm/ton nominal size of the outdoor unit installed. The airflow actually requested by the User Interface is modified by its internal algorithms for zoning, comfort or efficiency concerns. Refer to the documentation for the User Interface for more information on how the User Interface controls the fan coil. Safe operation of electric heaters requires airflow delivery at or above the minimum CFM for electric heater application listed in the chart below. The fan coil will adjust its airflow delivery to maintain safe airflow as operating mode and staging conditions require.

FE4A/FE5A FAN COIL AIRFLOW DELIVERY CHART (CFM) — ELECTRIC HEATING MODELS

MODEL FE4A	OUTDOOR UNIT CAPACITY BTUH	ELECTRIC HEATER kW RANGE						
		5	9	10	15	20	24	30
002	EMERGENCY	625	625	675	775	950	—	—
	18,000	625	625	675	—	—	—	—
	24,000	650	725	775	900	—	—	—
	30,000	800	875	875	925	1125	—	—
	36,000	975	975	975	1025	1125	—	—
003	EMERGENCY	675	700	775	850	1050	—	—
	24,000	675	875	875	1100	1150	—	—
	30,000	800	875	875	1100	1150	—	—
	36,000	975	975	1025	1150	1250	—	—
	42,000	1125	1125	1125	1150	1350	—	—
005	EMERGENCY	675	700	775	850	1050	1400	1425
	30,000	800	875	875	1100	1150	—	—
	36,000	975	975	1025	1150	1250	—	—
	42,000	1125	1125	1125	1150	1250	—	—
	48,000	1305	1305	1305	1305	1350	1500	1600
006	EMERGENCY	1050	1050	1050	1050	1125	1750	1750
	36,000	1050	1050	1100	1350	1350	—	—
	42,000	1125	1125	1150	1350	1350	—	—
	48,000	1300	1300	1300	1350	1500	1750	1750
	60,000	1625	1625	1625	1625	1750	1750	1750
MODEL FE5A	OUTDOOR UNIT CAPACITY BTUH	ELECTRIC HEATER kW RANGE						
		5	9	10	15	20	24	30
004	EMERGENCY	675	775	775	900	1125	—	—
	24,000	975	975	975	—	—	—	—
	30,000	1050	1050	1100	1125	—	—	—
	36,000	1050	1050	1100	1350	1350	—	—
	42000	1125	1125	1150	1350	1350	—	—

Note 1: Emergency – Air conditioner with electric heater application, or emergency heat.
Note 2: These airflows are minimum airflows as UL listed.
Note 3: Dashed entry indicates that the heater/fan coil/outdoor unit combination is not approved. Do not apply.