BLOCK 470.01 LOT 16 QUALIFICATION CODE _____ ADDRESS (SITE) 595 Brick Blvd. PERMIT NO. 09-1665

CONSTRUCTION PERMIT APPLICATION 09-002138

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

I. IDENTIFICATION

1. Proposed Work Site at: 595 Brick Blvd. WAWA
2. Name of Owner in Fee: WAWA Food Market
   Tel. (609) 706-5417 e-mail John.C.Millard@WAWA.com
   Address 260 W. Baltimore Pike (street) WAWA (municipality) PA. 19063 (zip code)
3. Ownership in Fee: Public _____ Private ✓
4. Principal Contractor: Kelly Kilowatt Elect. Co. Inc Tel. (732) 367-3030
   Address 189 N. County Line Rd e-mail Kellykilowatt@verizon.net
   Jackson, NJ 08527
   License No. OR, if new home, Builder Reg. No. 5918 Exp. Date 3/12
   Home Improvement Contractor Registration No. or Exemption Reason (if applicable): _____
   Federal Emp. ID No. 22-2235-701 FAX: (732) 363-3898
5. Architect or Engineer _____ Contact E
   Address _____ e-mail _____
   Tel. (____) _____ FAX: (____) _____
6. Responsible Person in Charge once Work has Begun Ed Kelly
   Tel. (732) 367-3030 FAX: (732) 363-3878

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	$ 40 ✓		
2. Electrical			
3. Plumbing			
4. Fire Protection			
5. Elevator Devices			
6. Subtotal			
7. Less 20% for State Plan Review	$		
8. Subtotal	$		
9. State Permit Surcharge Fee			
10. Subtotal	$		
11. Cert. of Occupancy			
12. Other			
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. Max. Live Load _____
7. Max. Occupancy Load _____
8. If Industrialized Building: State Approved ____ HUD ____
9. Total Land Area Disturbed _____ sq. ft.
10. Flood Hazard Zone _____
11. Base Flood Elevation _____ ft.
12. Wetlands yes ____ no ____

COMMERCIAL

IIa. PROPOSED WORK

- ☑ Minor Work
- ☐ New Building
- ☐ Addition
- ☐ Demolition
- ☐ Repair
- ☐ Alteration
- ☐ Renovation
- ☐ Reconstruction
- ☐ Asbestos Abat. -Subch. 8
- ☐ Lead Hazard Abatement
- ☐ Radon Remediation
- ☐ Annual Permit

IIb. SUBCODES (Check all that apply)

FOR OFFICE USE ONLY (Optional)

	Est. Cost	Plans Rec'd by	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates Approval	Resubmission Dates Rejection	Re-viewer
☐ Building									
☑ Electrical	300.00				6-23-9	AS			
☐ Plumbing									
☐ Fire Protection									
☐ Elevator									
TOTAL COST	300.00								

VII. DESCRIPTION OF BUILDING USE

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

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

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

D. Construct. Classification: Present _____ Proposed _____

III. PLAN REVIEW (optional)

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

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

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

CERTIFICATION IN LIEU OF OATH

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

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

Mark the following applicable boxes:

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

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

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

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

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

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

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

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

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

Signature _____ Date _____

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 Kelly Kilowatt Elect. Co. Inc.

Address 189 N. County Line Rd
Jackson, N.J. 08527

Telephone (732) 367-3030

Signature Edward P Kelly Pres.

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

CONSTRUCTION PERMIT

Date Issued 07/16/2009
Control # C-09-002138
Permit # 09-1665

IDENTIFICATION Block: 470.01 Lot: 16 Qualifier

Work Site Location: 595 BRICK BLVD. Brick Township, NJ

Owner in Fee: WAWA, INC
260 W BALTIMORE PIKE WAWA PA 19063

Telephone: (609) 706-5417

Contractor: KELLY KILOWATT ELEC CO INC
Address: 189 NORTH COUNTY LINE ROAD JACKSON NJ 08527

Telephone: (732) 367-3030
Lic. No. or Bldrs. Reg. No. 5918
Federal Employee. No. 22-2235701

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:

ELECTRICAL ALTERATIONS TOASTER RECEPTACLE

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 $300

Construction Official _____ Date _____

PAYMENTS (Office Use Only)

Building	$0
Electrical	$40
Plumbing	$0
Fire Protection	$0
Elevator Devices	$0
Other	$0.00
DCA Training Fee	$1
CO Fee	
Other	$0
Total	$41
Check No.	2126
Cash	$0
Credit	$0
Collected By	Kim Bogan

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

1 WHITE - INSPECTOR 2 CANARY - OFFICE 3 PINK - TAX ASSESSOR 4 GOLD - APPLICANT

REQUIRED INSPECTIONS

Construction work must be inspected in accordance with the State Uniform Construction Code Regulations N.J.A.C. 5:23-2.18. This agency will carry out such periodic inspections during the progress of work as are necessary to insure that the work installed conforms with the requirements of the Uniform Construction Code.

The owner or other responsible person in charge of work must notify this agency when work is ready for any required inspections specified below. Requests for inspections must be made at least 24 hours prior to the time the inspection is desired. Inspections will be performed within three business days of the time for which they are requested. The work must not proceed in a manner which will preclude the inspection until it has been made and approval granted.

☐ Required inspections for all subcodes for one- and two-family dwellings are as follows:

1. The bottom of footing trenches before placement of footings, except that in cases of pile foundations, inspections shall be made in accordance with the requirements of the building subcode.
2. Foundations and all walls up to grade level prior to back filling.
3. All structural framing, connections, wall and roof sheathing and insulation; electrical rough wiring, panel and service installation; rough plumbing. The framing inspection shall take place after the rough electrical and plumbing inspections and after the installation of the heating, ventilation and /or air conditioning duct system. The insulation inspection shall be performed after all other subcode rough inspections and prior to the installation of any interior finish material.
4. Installation of all finished materials, sealings of exterior joints, plumbing piping, trim and fixtures; electrical wiring, devices and fixtures; mechanical systems equipment.

Additional required inspections for all subcodes of construction, for other than one- and two-family dwellings, are fire suppression systems, heat producing devices and Barrier Free subcode accessibility, if applicable.

☐ Required special inspections. The applicant by accepting the permit will be deemed to have consented to these requirements:

☐ A final inspection is required for each applicable subcode area before a final Certificate of Occupancy or Approval may be issued. The final inspections include the installation of all interior and exterior finish materials, sealing of exterior joints, mechanical system and other required equipment; electrical wiring, devices and fixtures; plumbing pipes, trim and fixtures; tests required by any provision of the adopted subcodes, Barrier Free accessibility, if applicable; and verification of compliance with NJAC 5:23-3.5, "Posting structures".

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

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

COMMERCIAL

Date Received 06/18/2009
Date Issued 07/16/2009
Control # C-09-002138
Permit # 09-1665

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

COPY

Block 470.01 Lot 16 Qualification Code

Work Site Location: 595 BRICK BLVD. Brick Township, NJ

Owner in Fee: WAWA, INC

Address 260 W BALTIMORE PIKE WAWA PA 19063

Tel. (609) 706-5417

Contractor: KELLY KILOWATT ELEC CO INC

Address 189 NORTH COUNTY LINE ROAD JACKSON NJ 08527

Tel. (732) 367-3030 Fax. (732) 363-3878

Lic No. 5918

Federal Employee No. 22-2235701

COPY

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed M

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $300

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
☐ No Plan Required		

Joint Plan Review Required

☐ Building ☐ Plumbing

☐ Fire ☐ Elevator

☐ Electrical Plans Approved

Date:

Approved by:

SUBCODE APPROVAL

☐ CO ☐ CCO ☐ CA

Date: 7-30-9

Approved by:

INSPECTIONS

Type:	Failure	Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service			7-28-09	PD
Final				
Barrier-Free				

Dates (Month/Day)

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

C. CERTIFICATION IN LIEU OF OATH

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

Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
1		Recepticles	
		Switches	
		Detectors	
		Light Poles	
		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
1		TOTAL NUMBERS	$35
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air	
		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	$40
State Permit Surcharge Fee	$1
TOTAL FEE	$41

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received 11/6/07
Control # 09-1665
Date Issued 8/3/09
Permit #

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

Block 470.01 Lot 16 Qualification Code

Work Site Location Wawa Food Market 923
595 Brick Blvd, Bricktown, NJ 08723

Owner in Fee: Wawa Inc

Tel. (609) 706-5417 e-mail john.c.millard@wawa.com

Address 260 West Baltimore Pike Wawa PA 19063
street municipality zip code

Contractor: Kelly Kilowatt Electric Tel. (732) 367-3030

Address PO Box 886 Lakewood, NJ 08701 e-mail lou.Kellykilowatt@verizon.net

Contractor License No. 5918 Exp. Date 3/12

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

Federal Emp. ID No. 22-2235-701 FAX: (732) 363-3878

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Commercial Utility Co.

Est. Cost of Elec. Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW Date Initial

[X] No Plans Required 6-20-07

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				
Other				
Service				
Final				
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

C. CERTIFICATION IN LIEU OF OATH

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

Edward C Millard
Applicant's Signature/Contractor's Seal and Signature

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

U.C.C. F120 (rev. 10/06)
Internet version

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

30A 250V Toaster receptacle

QTY.	SIZE	ITEMS
		Lighting Fixtures
1		Receptacles
		Switches
		Detectors
		Light Poles
		Motors—Fract. HP
		Emergency/Exit Lights
		Communications Points
		Alarm Devices/F.A.C. Panel
1		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

FEE (Office Use Only)

$ Commercial

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

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

COMMERCIAL

Date Received 06/16/2009
Date Issued 7/16/09
Control # C-09-002138
Permit # 09-1665

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

Block 470.01 Lot 16 Qualification Code

Work Site Location: 595 BRICK BLVD. Brick Township, NJ

Owner in Fee: WAWA, INC

Address 260 W.BALTIMORE PIKE WAWA PA 19063

Tel. (609) 706-5417

Contractor: KELLY KILOWATT ELEC CO INC

Address 189 NORTH COUNTY LINE ROAD JACKSON NJ 08527

Tel. (732) 367-3030 Fax. (732) 363-3878

Lic No 5918

Federal Employee No. 22-2235701

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed M

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $300

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
☒ No Plan Required	6-23-9	

Joint Plan Review Required
☐ Building ☐ Plumbing
☐ Fire ☐ Elevator
☐ Electrical Plans Approved

Date:
Approved by:

SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA

Date:
Approved by:

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Rough				
Barrier-Free				
Trench				
Temp. Serv.				
Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

C. CERTIFICATION IN LIEU OF OATH
I hereby certify that I am the (agent of) owner of the record and am authorized to make this application and perform the work listed on this application.

Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
1		Recepticles	
		Switches	
		Detectors	
		Light Poles	
		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
1		TOTAL NUMBERS	$35
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air	
		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	$40
State Permit Surcharge Fee	$1
TOTAL FEE	$41

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

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

Block 470.01 Lot 16 Qualification Code

Work Site Location Wawa Food Market 923
595 Brick Blvd, Bricktown, NJ 08723

Owner in Fee: Wawa Inc

Tel. (609) 706-5417 e-mail john.c.millard@wawa.com

Address 260 West Baltimore Pike Wawa PA 19063
street municipality zip code

Contractor: Kelly Kilowatt Electric Tel. (732) 367-3030

Address PO Box 886 Lakewood, NJ 08701 e-mail lou.Kellykilowatt@verizon.net

Contractor License No. 5918 Exp. Date

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

Federal Emp. ID No. 22-2235-701 FAX: (732) 363-3878

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Commercial Utility Co.

Est. Cost of Elec. Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

[X] No Plans Required Date 6-23-21 Initials

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				
Other				
Service				
Final				
Barrier-Free				
Temp. Cut-in-Card Date Issued				
Final Cut-in-Card Date Issued				
Annual Pool Inspection				
Date of Grounding and Bonding Certification				

C. CERTIFICATION IN LIEU OF OATH

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

Edward C Kelly
Applicant's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

30A 250V Toaster receptacle

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
1		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	

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

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

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

Block 470.01 Lot 16 Qualification Code

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595 Brick Blvd, Bricktown, NJ 08723

Owner in Fee: Wawa Inc

Tel. (609) 706-5417 e-mail john.c.millard@wawa.com

Address 260 West Baltimore Pike Wawa PA 19063
street municipality zip code

Contractor: Kelly Kilowatt Electric Tel. (732) 367-3030

Address PO Box 886 Lakewood, NJ 08701 e-mail lou.Kellykilowatt@verizon.net

Contractor License No. 5918 Exp. Date

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

Federal Emp. ID No. 22-2235-701 FAX: (732) 363-3878

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed

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

Building Occupied as Commercial Utility Co.

Est. Cost of Elec. Work $

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
[X] No Plans Required	6-23-08	

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				
Other				
Service				
Final				
Barrier-Free				

Temp. Cut-in-Card Date Issued

Final Cut-in-Card Date Issued

Annual Pool Inspection

Date of Grounding and Bonding Certification

C. CERTIFICATION IN LIEU OF OATH

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

Edward C Millard
Applicant's Signature/Contractor's Seal and Signature

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

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

30A 250V Toaster receptacle

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
1		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	

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

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

ELECTRICAL SUBCODE
TECHNICAL SECTION

COMMERCIAL

Date Received 06/18/2009
Date Issued 07-12/16/09
Control # C-09-002138
Permit # 09-1665

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

Block 470.01 Lot 16 Qualification Code

Work Site Location: 595 BRICK BLVD. Brick Township, NJ

Owner in Fee: WAWA, INC

Address 260 W BALTIMORE PIKE WAWA PA 19063

Tel. (609) 706-5417

Contractor: KELLY KILOWATT ELEC CO INC

Address 189 NORTH COUNTY LINE ROAD JACKSON NJ 08527

Tel. (732) 367-3030 Fax. (732) 363-3878

Lic No. 5918

Federal Employee No. 22-2235701

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed M

☐ Pole/Pad # ☐ Temporary ☐ Other

Building Occupied as Utility Co.

Estimated Cost of Electrical Work $300

JOB SUMMARY (Office Use Only)

PLAN REVIEW

	Date	Initial
☑ No Plan Required	6-23-9	AB

Joint Plan Review Required
☐ Building ☐ Plumbing
☐ Fire ☐ Elevator
☐ Electrical Plans Approved

Date:
Approved by:

SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA

Date:
Approved by:

INSPECTIONS Type:	Failure	Dates (Month/Day) Failure	Approval	Initial
Rough				
Barrier-Free				
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Constr. Serv.				
TCO				
Other				
Service				
Final				
Barrier-Free				
Temp. Cut-in-Card Date Issued				
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Annual Pool Inspection				
Date of Grounding and Bonding Certification				

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Applicant's Signature/Contractor's Seal and Signature

☐ Licensed Elec Cont'r ☐ Certif'd Landscape Irrigation Cont'r ☐ Exempt Applicant

D. TECHNICAL SITE DATA

QTY.	SIZE	ITEMS	FEE (Office Use Only)
		Lighting Fixtures	
1		Recepticles	
		Switches	
		Detectors	
		Light Poles	
		Motors - Fract. HP	
		Emergency & Exit Lights	
		Communication Points	
		Alarm Devices/F.A.C. Panel	
1		TOTAL NUMBERS	$35
		Pool Permit/with UW Lights	
		Storable Pool/Spa/Hot Tub	
		KW Elec. Range/Receptical	
		KW Oven/Surface Unit	
		KW Elec. Water Heater	
		KW Elec. Dryer/Recepticle	
		KW Dishwasher	
		HP Garbage Disposal	
		KW Central A/C Unit	
		HP/KW Space Heater/Air	
		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	$40
State Permit Surcharge Fee	$1
TOTAL FEE	$41

U.C.C F120 (rev. 12/07)

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ELECTRICAL SUBCODE
TECHNICAL SECTION

COMMERCIAL

Date Received 06/18/2009
Date Issued 11-17/16/09
Control # C-09-002138
Permit # 09-1665

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	Date	Initial
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☐ Building ☐ Plumbing
☐ Fire ☐ Elevator
☐ Electrical Plans Approved

Date:
Approved by:

SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA

Date:
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INSPECTIONS Type:	Failure	Failure	Approval	Initial
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TECHNICAL SECTION

COMMERCIAL

Date Received 06/18/2009
Date Issued
Control # C-09-002138
Permit #

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Approved by:

SUBCODE APPROVAL
☐ CO ☐ CCO ☐ CA

Date:
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