

BLOCK 670 LOT 10.01 ADDRESS (SITE) 2700 Hooper AVE PERMIT NO. 185-95

2/14/95 VILLA VICTORIA
Applicant Completes: Sections I, II, III (optional), IV, VI and VII



CONSTRUCTION PERMIT APPLICATION

I. IDENTIFICATION

1. Proposed Work-site at: 2700 Hooper AVE

2. Name of Owner in Fee: GIUSEPPE SPALERO Tel. ()

Address 17 TUNES Brook Rd.
street municipality zip code

3. Ownership in Fee: Public _____ Private _____

4. Principal Contractor: SELF Tel. (908) 920-5500

Address SAME

License No. OR, if new home, Builder Reg. No. _____ Exp. Date _____

Federal Emp. No. _____ Social Security No. _____

5. Architect or Engineer _____ Tel. ()

Address _____

6. Responsible Person In Charge of Work _____ Tel. ()

V. FEE SUMMARY (for office use only)

		Update	Update
1. Building	\$ <u>30 -</u>		
2. Electrical			
3. Plumbing			
4. Fire Protection	<u>46 -</u>	<u>46 -</u>	
5. Other	<u>76 -</u>		
6. Subtotal	\$ <u>76 -</u>		
7. Less 20% for State Plan Review	<u>8 -</u>		
8. Subtotal	\$ <u>2 -</u>	<u>6 -</u>	
9. DCA Training Fee			
10. Subtotal	\$ <u>20 -</u>		
11. Cert. of Occupancy			
12. Other	<u>106 -</u>		
13. TOTAL	\$ <u>106 -</u>		

VI. BUILDING/SITE CHARACTERISTICS

	(office use only)
1. Number of Stories	
2. Height of Structure	ft.
3. Area—Largest Floor	sq. ft.
4. Building Area—All Floors	sq. ft.
5. Volume of 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 _____	sq. ft.
11. Fire Grading	
12. Max. Live Load	
13. Max. Occupancy Load	

II. PROPOSED WORK

- 1 ☐ Minor Work (single trade)
- 2 ☐ Small Job (\$5,000 and no prior approvals)
- 3 ☐ New Building
- 4 ☒ Addition
- 5 ☒ Alteration
- 6 ☒ Fire Protection
- 7 ☐ Plumbing
- 8 ☐ Electrical
- 9 ☐ Asbestos Abatement
- 10 ☐ Demolition

Est. Cost

3,000
6,500

TOTAL COSTS

9,500

OPTIONAL (for office use only)

Plans Rec'd By	Date Rec'd	Rejection Date	Approval Date	Re-viewer	Resubmission Dates	Re-viewer
<u>PK</u>			<u>2/14/95</u>	<u>PK</u>		
			<u>2/14/95</u>	<u>JE</u>	<u>7/29/95</u>	<u>JE</u>

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: _____

LDS BR 10210181

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

George S. Seltz

Date

2/14/95

II. AGENT SECTION

(to be completed if the applicant is not the owner in fee)

I hereby certify the following as required by the New Jersey 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

Address

Telephone ()

Signature

Date

OFFICE DATE RECEIVED: _____

VIII. PRIOR APPROVALS CHECKLIST (office use only)	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	Prelimin. Initial	Final Date	
☐ Planning Board									
☐ Zoning Board									
☐ Sewer Authority									
☐ Water Authority									
☐ Fire Department									
☐ Police Department									
☐ Health Department									
☐ Soil Conservation									
☐ N.J. Dept. of Community Affairs									
☐ N.J. Department of Transportation									
☐ N.J. Dept. of Environmental Protect.									
☐ Utility Dig No.									
☐ Other									
☐									
☐									

IX. SUBCODES AND SPECIAL REGULATIONS APPLICABLE (office use only—optional)

Name of Code & Edition	Name of Code & Edition	Other
Building _____	Energy _____	
Electrical _____	Barrier Free _____	
Plumbing _____	Flood Hazard _____	
Fire Protection _____	As Built Elevation Cert. _____	
Mechanical _____	Other _____	

X. CERTIFICATES ISSUED (office use only)

DATE EXPIRED

☐ Temporary Certificate of Occupancy	No. _____	_____
☐ Temporary Certificate of Occupancy	No. _____	_____
☐ Continued Certificate of Occupancy	No. _____	_____
☐ Certificate of Occupancy	No. _____	_____
☐ Certificate of Approval	No. _____	_____



PERMIT UPDATE

Date Update Issued 6-1-95
Control #
Permit # 177-95
Date Permit Issued
2-14-95

IDENTIFICATION Block 670 Lot 16.01
Work Site Location VILLA VICTORIA Contractor FIRE SPRINKLER SYSTEMS INC
700 WILSON AVE Address 1794 RT 9 ST 8
Owner in Fee G. SALPICO TEMS RIVER NJ 07055
Address 2700 HOOVER AVE Tele. (108) 914 3307 BLOCK 100TH
1 KIKK NJ Lic. No. or Bldrs. Reg. No. 0.00
Tele. (908) 920 Federal Emp. No. 222022 79 DTU #
or Social Security No. 110-01 #

is hereby granted permission to perform the following work:

[] BUILDING [] PLUMBING [] Other _____
[] ELECTRICAL [x] FIRE PROTECTION

DESCRIPTION OF WORK:

LIMITED AREA ATTIC SPRINKLERS

Estimated Cost of Work \$ 7000.00

A J C...
CONSTRUCTION OFFICIAL

PAYMENTS (Office Use Only) A.	46.00
Building TOTAL	6.00
Plumbing CHECK	52.00
Electrical CHANGE	0.00
Fire Protection <u>1662005</u> <u>11/05</u> <u>00220005</u>	14.08
Other	
Other	
DCA Training Fee <u>10</u>	
Cert. of Occ.	
Other	
Total <u>52</u>	
Check No. <u>5606</u>	
Cash	
Collected By:	



**BUILDING
SUBCODE
TECHNICAL SECTION**



Date Received
Date Issued
Control #
Permit #

2/14/95
188-95

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

Block 670 Lot 10.01
Work Site Location: 2700 HOOVER AVE

Owner in Fee CLUSEPPE SALVETICO
Address 17 TUNGS BROOK RD.

Tele. (Jca) 7201550

Contractor CLUSEPPE SALVETICO

Address 2700 HOOVER AVE

Tele. ()
Lic. No. or Bids. Reg. No.
Federal Emp. No. or Social Security No.

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.

Signature _____

**D. TECHNICAL SITE DATA
DESCRIPTION OF WORK**

Stairway to Second
+ floor.

JOB SUMMARY (Office Use Only)		PLAN REVIEW		Date		Initial		INSPECTIONS		Dates (Month/Day)		Failure		Approval		Initial	
☐ No Plans Req.																	
☒ All																	
☐ Footing																	
☐ Foundation																	
☐ Frame																	
☐ Other																	
Joint Plan Review Required:																	
☐ Elec. ☐ Plumb. ☐ Fire																	
SUBCODE APPROVAL																	
☐ CO ☐ CCO ☐ CA																	
Date:																	
Approved By:																	

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed	Est. Cost of Bldg. Work:
Constr. Class			1. New Bldg. \$
No. of Stories			2. Alteration \$
Height of Structure			3. Total (1+2) \$

Area--Largest Floor _____ Sq. Ft.
New Bldg. Area/All Floors _____ Sq. Ft.
Volume of New Structure _____ Cu. Ft.
Total Land Area Disturbed _____ Sq. Ft.

TYPE OF WORK:		(Office Use Only)	
☐ New Building			
☐ Addition			
☐ Alteration			
☐ Roofing			
☐ Siding			
☐ Fence			
☐ Sign			
☐ Pool			
☐ Asbestos Abatement			
☐ Other			
☐ Demolition			

Administrative Surcharge		Minimum Fee	
Paid ☐ Check #			
Collected by:			
DCA TRAINING FEE			
TOTAL FEE			



FIRE PROTECTION SUBCODE TECHNICAL SECTION



Date Received
Date Issued
Control #
Permit #

2/14/95
188-95

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

Block 670 Lot 10.01

Work Site Location 2700 HADDER AVE

Owner in Fee SHARPIETRO

Address 17 TUNES BROOK RD.

Tele. (908) 920-1550

Contractor SHARPIETRO

Address SHARPIETRO

Tele. () () ()

Lic. No. _____ or Social Security No. _____

Federal Emp. No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group _____ Present _____ Proposed _____

Const. Class. _____ Present _____ Proposed _____

Heating Systems [] New [] Existing

Type: [] Gas [] Oil [] Electrical [] Solar

[] Other _____

Location: _____

Total Est. Cost of Fire Prot. Work \$ _____ [] Other _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:

[] No Plans Required

Joint Plan Review Required:

[] Bldg. [] Plumb.

[] Elec. [] Elevator

[] Fire Plans Approved

Date: 2/14/95

Approved by: _____

SUBCODE APPROVAL:

[] CO [] CCO [] CA

Date: _____

Approved by: _____

INSPECTIONS:

Type:

Suppression Test

Fire Alarm Test

Smoke Test

Mechanical

TCO

Other

Other

Other

Dates (Month/Day)

Failure

Failure

Approval

Initial

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.

SIGNATURE

D. TECHNICAL SITE DATA

Description of Work

Water Supply Source

Method of Valve Supervision

Local Alarm Supervision

Central Supervision

Proprietary Supervision

Flammable Liquid Storage Tanks

Combustible Liquid Storage Tanks

L.P.G. Storage Tanks

L.N.G. Storage Tanks

Number

Wet Sprinkler Heads

Dry Sprinkler Heads

TOTAL

Smoke Detectors

Heat Detectors

TOTAL

Stand Pipes

Kitchen Hold Exhaust Systems

Pre-Engineered Systems

CO₂ Suppression

Halon Suppression

Foam Suppression

Dry Chemical

Wet Chemical

Gas or Oil Fired Appliance

OTHER

FEE (Office Use Only)

Administrative Surcharge

Minimum Fee

DCA Training Fee

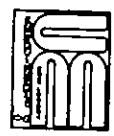
TOTAL FEE

U.C.C. Form F-140B

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

V/LA Victoria



**FIRE PROTECTION
SUBCODE
TECHNICAL SECTION**



Date Received _____
Date Issued 2-14-95
Control # _____
Permit # 188-95
6-1-95

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

Block 670 Lot 10.00
Work Site Location BRICK NJ
Owner in Fee GA. SALPIETRO
Address 2700 OLD HOOPER AVE
Brick NJ
Tele. (908) 920
Contractor FIRE SPRINKLER SYSTEMS INC
Address 1394 RT 9 STB
TOMS RIVER NJ 08755
Tele. (908) 914 0307
Lic. No. _____
Federal Emp. No. 222022879 of Social Security No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group _____ Present _____ Proposed _____
Constr. Class. _____ Present _____ Proposed _____
Heating Systems [] New [X] Existing
Type: [X] Gas [] Oil [] Electrical [] Solar
[] Other _____
Location: _____
Total Est. Cost of Fire Prot. Work \$ 7000.00 [] Other _____

Used last working copy

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS:	Dates (Month/Day)
[] No Plans Required	Type:	Failure Failure Approval Initial
Joint Plan Review Required:	Suppression Test	
[] Bldg. [] Plumb.	Fire Alarm Test	
[] Elec. [] Elevator	Smoke Test	
[] Fire Plans Approved	Mechanical	
Date: <u>9/28/95</u>	TCO	
Approved by: _____	Other	
SUBCODE APPROVAL:	Other	
[] CO [] CCO [] CA	Other	
Date: _____	Other	
Approved by: _____	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.

Val L. Salpietro
SIGNATURE

D. TECHNICAL SITE DATA

Description of Work
Water Supply Source
Method of Valve Supervision
Local Alarm Supervision
Central Supervision
Proprietary Supervision
1st DOMESTIC - EXISTING
LOGIC + CHAIN
YES
NO
NO

Flammable Liquid Storage Tanks
Combustible Liquid Storage Tanks
L.P.G. Storage Tanks
L.N.G. Storage Tanks
() Capacity N/A Fuel _____
() Capacity + Fuel _____
() Capacity + Fuel _____

Wet Sprinkler Heads
Dry Sprinkler Heads
TOTAL
Number
15
15
N/A
46

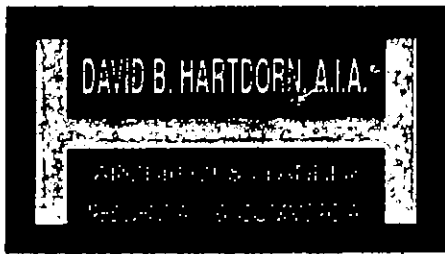
Smoke Detectors
Heat Detectors
TOTAL
N/A
+
+

Stand Pipes
Kitchen Hood Exhaust Systems
+
+
+

Pre-Engineered Systems
CO₂ Suppression
Halon Suppression
Foam Suppression
Dry Chemical
Wet Chemical
+
+
+
+
+
+

Gas or Oil Fired Appliance
OTHER
+
+
+

Paid [] Check # _____
Collected by: _____
Administrative Surcharge \$ 46
Minimum Fee \$ _____
DCA Training Fee \$ _____
TOTAL FEE \$ _____



RECEIVED
FEB 16 1995
DIV. OF INSPECTION

February 13, 1995

Villa Victoria
2700 Hooper Avenue
Brick, New Jersey
08723

RE: Fire Safty Upgrade

Dear Joe,

The new drawings are dated February 13, 1995. The upstairs door has been changed to swing into the stairwell and the steel lintel on the first floor has been revised to (2) 2"X 10"'s.

While speaking with Mr. Clayton a few weeks back about confirming the travel distance of the most remote storage area and the fact that the sprinkler system would not permit that use without the second firestair, the following discussion took place, for the record, and something for you to think about. The sprinkler system was asked to be installed by the Brick Township Building Department in the occupiable areas only on the second floor. Mr. Clayton felt that in your best interest you may want to consider sprinkling the attic areas also for extra protection. This is completly up to you but makes sence in limiting potential damage in the event of a fire.

This is only a suggestion. If you have any questions please give my office a call. Thanks.

DBH/llh

Sincerely,

David B. Hartdorn, A.I.A.
Architect & Planner

cc: Brick Twp. Building Department
Mr. Clayton (Bureau of Fire Safty)

=====

S U M M A R Y

O F

H Y D R A U L I C

C A L C U L A T I O N S

F O R

V I L L A V I T T O R I A R E S T A U R A N T

2700 Hooper Avenue, Brick, NJ 08723 Job No:95032

=====

Submitted By

Fire Sprinkler Systems, Inc. - 1594 Rt. 9, Suite 8 - Toms River, NJ 08755

=====

Design Specifications	Water Supply Information	System Demand
Density : 0.160	64.00 psi @ 0.00 gpm	57.67 psi
Design Area: 271.00	57.00 psi @ 1210.00 gpm	@ 54.5 gpm

Total Demand: 54.5 gpm @ 57.67 psi

System safety factor: 6.30 psi

Notes: FRICTION LOSS THROUGH BFP @ 4 PSI

=====

*Alfred R. M...
4/27/95*

List of Fitting Abbreviations

Example: "E2TC" = one Std. Elbow, two Std. Tee , and one Check Va

Code:Description	Code:Description	Code:Description	Code:Description
A : Alarm Va	H : 45 Elbow	O :	V :
B : Butt'flyVa	I :	P :	W :
C : Check Va	J :	Q :	X :
D : DryPipeVa	K :	R :	Y :
E : Std. Elbow	L : LongTurnEl	S :	Z :
F : Deluge Va	M :	T : Std. Tee	
G : Gate Va	N :	U :	

Summary of Sprinkler and Hose Flows

Job No:95032

VILLA VITTORIA RESTAURANT

Design density: .16

Supplied flow and pressure is based on 57.67 psi available at supply
(63.98 psi is actually available)

Ref.	PRESSURE			K	FLOW		Percent	Ref.
Pt.	Pt	Pv	Pn	Factor	Actual	Minimum	Excess	Pt.
=====	=====	=====	=====	=====	=====	=====	=====	=====
S01	9.90		9.90	4.24	13.3	11.2	18.7%	S01
S02	10.00		10.00	4.24	13.4	13.4	0.0%	S02
S03	10.09		10.09	4.24	13.5	13.4	0.7%	S03
S04	11.37		11.37	4.24	14.3	11.2	27.7%	S04

Flow and Pressure Summary

Job No: 95032 VILLA VITTORIA RESTAURANT

Elev.	REF.	Flow	Pt	Pf	Pe	Pt	REF.	Elev.	F R I C T I O N L O S S C A L C U L A T I O N S						Velocity		
ft.	POINT	gpm	psi	psi	psi	psi	POINT	ft.	Length	Fitting	Length	Total	Pf/ft	Diam	C	Flow	fps
16.00	L01 ((	13.3 ((	10.05	0.05	0.00	10.10	L02	16.00	8.00			8.00	0.006	1.687	120	13.3	1.9
16.00	L01))	13.3))	10.05	-0.14	0.00	9.90	S01	16.00	3.00			3.00	0.048	1.104	120	13.3	4.5
16.00	L02 ((	26.7 ((	10.10	0.17	0.00	10.26	L03	16.00	3.50	E	4.00	7.50	0.022	1.687	120	26.7	3.8
16.00	L02))	13.4))	10.10	-0.10	0.00	10.00	S02	16.00	2.00			2.00	0.048	1.104	120	13.4	4.5
16.00	L03 ((	40.2 ((	10.26	0.70	0.43	11.40	L04	15.00	3.00	ET	12.00	15.00	0.047	1.687	120	40.2	5.8
16.00	L03))	13.5))	10.26	-0.08	0.00	10.18	L10	16.00	4.50	T	8.00	12.50	0.006	1.687	120	13.5	1.9
15.00	L04 ((	54.5 ((	11.40	1.48	0.00	12.88	L05	15.00	6.00	ET	12.00	18.00	0.082	1.687	120	54.5	7.8
15.00	L04))	14.3))	11.40	-0.03	0.00	11.37	S04	15.00	0.50			0.50	0.055	1.104	120	14.3	4.8
15.00	L05 ((	54.5 ((	12.88	0.90	0.00	13.78	L06	15.00	11.00			11.00	0.082	1.687	120	54.5	7.8
15.00	L06 ((	54.5 ((	13.78	0.33	0.00	14.11	L07	15.00	4.00			4.00	0.082	1.687	120	54.5	7.8
15.00	L07 ((	54.5 ((	14.11	0.99	0.00	15.10	L08	15.00	12.00			12.00	0.082	1.687	120	54.5	7.8
15.00	L08 ((	54.5 ((	15.10	1.56	0.43	17.09	L09	14.00	19.00			19.00	0.082	1.687	120	54.5	7.8
14.00	L09 ((	54.5 ((	17.09	0.85	0.87	18.81	M01	12.00	24.00	2E	10.00	34.00	0.025	2.154	120	54.5	4.8
16.00	L10))	13.5))	10.18	-0.10	0.00	10.09	S03	16.00	2.00			2.00	0.049	1.104	120	13.5	4.5
12.00	M01 ((	54.5 ((	18.81	0.68	4.34	23.83	M02	2.00	15.00	262E	12.00	27.00	0.025	2.154	120	54.5	4.8
2.00	M02 ((	54.5 ((	23.83	30.80	3.04	57.67	M03	-5.00	50.00	2EG	7.56	57.56	0.535	1.055	150	54.5	19.9

Path No:1 Remote to Supply

Principal path

Feeds Path:2 at Pt:L02, Path:3 at Pt:L03, Path:4 at Pt:L04

Ref Elev. Pt. ft.	Pressure (psi) Pt Pv Pn	K Factor	Flow (gpm) Added	Veloc (fps)	Diam. in.	Actual Fitting Length	Fitting Summary Length	Total Length	Frict.Loss per.ft Total	Elev. Loss Psi (ft.)	Next Ref Press Pt.
(C=120)											
S01 16.00	9.90	9.90	4.24	13.3	13.3	4.46	1.104	3.00	3.00 0.048 0.14		10.05 L01
L01 16.00	10.05	10.05			13.3	1.91	1.687	8.00	8.00 0.006 0.05		10.10 L02
L02 16.00	10.10	10.10		13.4	26.7	3.83	1.687	3.50 E	4.00 7.50 0.022 0.17		10.25 L03
L03 16.00	10.26	10.26		13.5	40.2	5.76	1.687	3.00 ET	12.00 15.00 0.047 0.70	0.43 (1.00)	11.40 L04
L04 15.00	11.40	11.40		14.3	54.5	7.80	1.687	6.00 ET	12.00 18.00 0.082 1.48		12.88 L05
L05 15.00	12.88	12.88			54.5	7.80	1.687	11.00	11.00 0.082 0.90		13.78 L06
L06 15.00	13.78	13.78			54.5	7.80	1.687	4.00	4.00 0.082 0.33		14.11 L07
L07 15.00	14.11	14.11			54.5	7.80	1.687	12.00	12.00 0.082 0.99		15.10 L08
L08 15.00	15.10	15.10			54.5	7.80	1.687	19.00	19.00 0.082 1.56	0.43 (1.00)	17.09 L09
L09 14.00	17.09	17.09			54.5	4.79	2.154	24.00 2E	10.00 34.00 0.025 0.85	0.87 (2.00)	18.81 M01
M01 12.00	18.81	18.81			54.5	4.79	2.154	15.00 262E	12.00 27.00 0.025 0.68	4.34 (10.00)	23.83 M02
(C=150)											
M02 2.00	23.83	23.83			54.5	19.95	1.055	50.00 2EG	7.56 57.56 0.535 30.00	3.04 (7.00)	57.67 M03
M03 -5.00	57.67										

Path K-Factor = 7.18

Path No:2 Branch Line

Fed by path No.1

Ref Elev. Pt. ft.	Pressure (psi) Pt Pv Pn	K Factor	Flow (gpm) Added	Veloc (fps)	Diam. in.	Actual Fitting Length	Fitting Summary Length	Total Length	Frict.Loss per.ft Total	Elev. Loss Psi (ft.)	Next Ref Press Pt.
(C=120)											
S02 16.00	10.00	10.00	4.24	13.4	13.4	4.48	1.104	2.00	2.00 0.048 0.10		10.10 L02
L02 16.00	10.10										

Path K-Factor = 4.22

Path No:3 Branch Line

Fed by path No.1

Ref Elev. Pt. ft.	Pressure (psi) Pt Pv Pn	K Factor	Flow (gpm) Added	Veloc (fps)	Diam. in.	Actual Fitting Length	Fitting Summary Length	Total Length	Frict.Loss per.ft Total	Elev. Loss Psi (ft.)	Next Ref Press Pt.
(C=120)											
S03 16.00	10.09	10.09	4.24	13.5	13.5	4.50	1.104	2.00	2.00 0.049 0.10		10.18 L10
L10 16.00	10.18	10.18			13.5	1.93	1.687	4.50 T	8.00 12.50 0.006 0.08		10.25 L03
L03 16.00	10.25										

Path K-Factor = 4.20

Drawing: #1

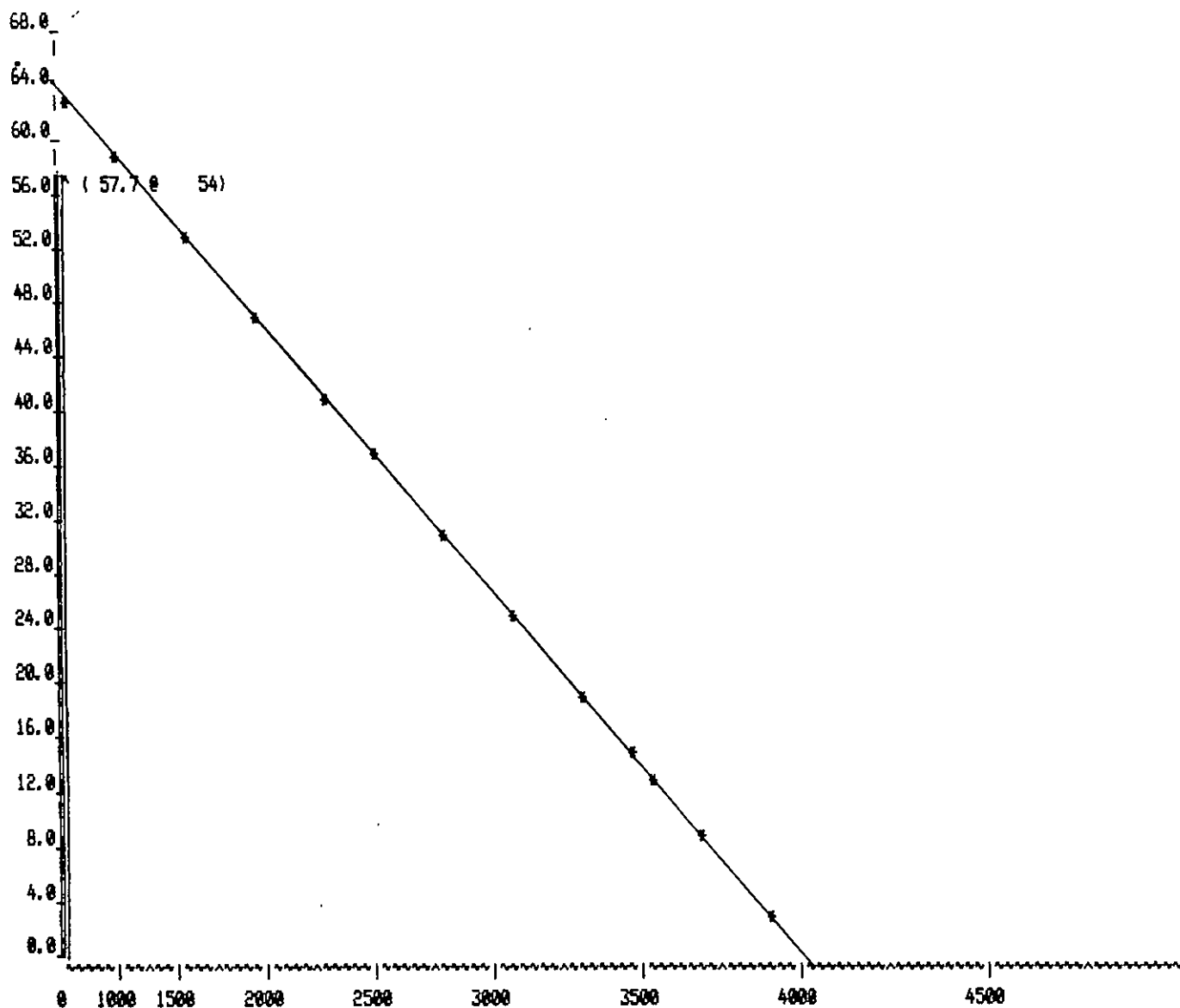
Path No:4 Branch Line

Fed by path No.1

Ref Elev.	Pressure (psi)	K	Flow	Veloc	Diam.	Actual Fitting	Fitting	Total	Frict.Loss	Elev. Loss	Next Ref
Pt. ft.	Pt Pv Pn	Factor	Added	Total	fps in.	Length	Summary	Length	per.ft Total	Psi (ft.)	Press Pt.

[illegible]

Path K-Factor = 4.23



Pressure vs. Flow
 64.00 0.00
 57.00 1210.00
 0 4002.10

VILLA VITTORIA RESTAURANT
 2700 Hooper Avenue,
 Brick, NJ 08723

Job Number: 95032
 4/21/95

Reliable®

Model G Automatic Sprinklers Spray Upright, Spray Pendent and Conventional

Product Description

The Reliable Model G Automatic Sprinkler utilizes the center strut solder in compression principle of construction. The fusible alloy is captured in the cylinder of the solder capsule by a stainless steel ball. When the fusible alloy melts the ball moves into the cylinder allowing the cylinder to fall away from the sprinkler. When this happens, the lever is released to spring free from the sprinkler so that all of the operating parts clear from the waterway allowing the deflector to distribute the discharging water.

Except for the parts in the cylinder as mentioned above, the sprinkler components are made from copper based alloys for maximum corrosion protection. Lead plated, wax coated or wax over lead plated sprinklers are available for specially severe environments. Chrome plated sprinklers are available for decorative purposes.

All sprinklers are individually hydrostatically tested.

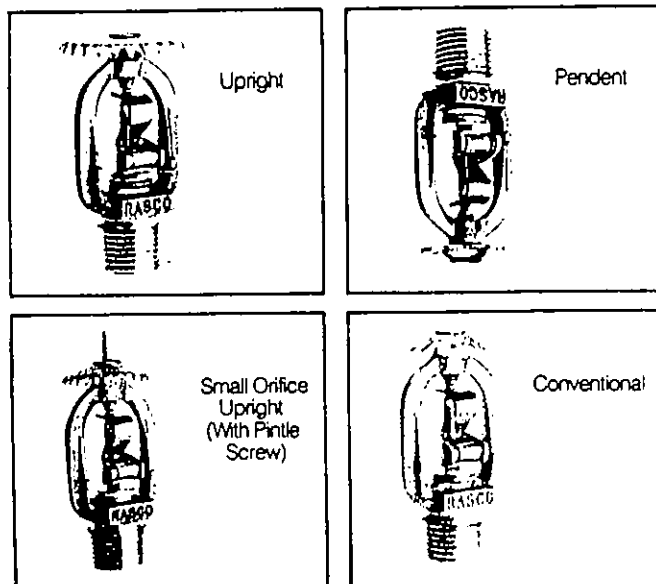
All sprinklers are identified as to their fusing point by markings that appear on several of the operating parts and by an identifying color that appears on the frame.

Sprinkler Types

Standard Upright—This deflector configuration is normally used with exposed piping installations. Water is distributed laterally and downward in a wide pattern approximating a hemisphere which is completely and uniformly filled with water in the form of small drops or spray. At a sprinkler height of 10 feet, a circular area of approximately 20 feet in diameter is covered by the water discharged at the minimum pressure.

Standard Pendent—This deflector configuration is normally used where the space above the piping is not adequate or where a concealed piping installation is employed. The discharge characteristics of the Standard Pendent are virtually identical to the Standard Upright as described above.

Large and Small Orifice—By varying the orifice size, a large or small orifice sprinkler is created that will distribute as much as 40% more water or 65% less water than the normal 1/2" orifice sprinkler. These sprinklers are identified by the orifice size that is stamped in the base of the sprinkler and by the pintle that extends from the deflector—the exception is the Large Orifice Sprinkler with the 3/4" NPT inlet thread where the size of the inlet is sufficient to classify this sprinkler as one having a larger than standard orifice.



Conventional—This deflector configuration is used primarily in those countries where the LPC installation rules have precedence. The sprinkler is designed to distribute a portion of its water discharge upward against the ceiling with the balance downward. It may be installed in either the Upright or the Pendent position. Sprinklers with conventional deflectors are available with orifice sizes corresponding to light, ordinary and extra-high hazard installations.

Application and Installation

Standard sprinklers are used in fixed fire protection systems: Wet, Dry, Deluge or Preaction. Care must be exercised that the orifice sizes, temperature ratings, deflector styles and sprinkler spacings are in accordance with the latest published standards of the National Fire Protection Association or the approving authority having jurisdiction.

The sprinklers must be installed with the Reliable Model D Sprinkler Wrench. Any other type of wrench may damage the sprinkler.

The approvals or listings of Reliable Automatic Sprinklers by major approving organizations are shown in the tabulated list provided on the back of this bulletin.

*Patent No. 4,440,234

The Reliable Automatic Sprinkler Co., Inc., 525 North MacQuesten Parkway, Mount Vernon, New York 10552

Model G Installation Data

Sprinkler Type	"K" Factor		Sprinkler Height	Approvals
	US	Metric		
Standard—Upright (SSU) and Pendent (SSP) Deflectors Marked to Indicate Position				
1/2" Standard Orifice with 1/2" NPT (15 mm) Thread	5.62	81.0	27 1/2" 73 mm	1, 2, 3, 4, 5, 6, 7
3/8" Small Orifice ⁽¹⁾ with 1/2" NPT (15 mm) Thread	4.24	61.0	33 1/8"	1, 3, 7
3/8" Small Orifice ⁽¹⁾ with 1/2" NPT (15 mm) Thread	2.82	40.6	33 1/8"	1, 2, 3, 7
3/8" Small Orifice ⁽¹⁾ with 1/2" NPT (15 mm) Thread	1.98	28.5	33 1/8"	1, 3, 7
1 1/2" Large Orifice ⁽¹⁾ with 1/2" NPT (15 mm) Thread	7.96	114.7	33 1/8"	1, 2, 3, 7
1 1/2" Large Orifice ⁽¹⁾ with 3/4" NPT Thread	8.20	118.2	12 3/16"	1, 2, 3, 7
20 mm XHH with 20 mm Thread	8.20	118.2	75.4 mm	4, 5, 6
10 mm XLH with 10 mm Thread	4.10	59.1	73 mm	4, 5, 6
Conventional—Installed in Upright or Pendent Position				
10 mm XLH with 10 mm Thread	4.10	59.1	73 mm	5
15 mm Standard Orifice with 15 mm Thread	5.62	81.0	73 mm	4, 5, 6
20 mm XHH with 20 mm Thread	8.20	118.2	75.4 mm	4, 5

(1) Identified by pintle extending above deflector. Sprinkler Height includes pintle extension

Temperature Ratings

Classification	Sprinkler Rating		Maximum Ceiling Temperature		Frame* Color
	*F	*C	*F	*C	
Ordinary	135	57	100	38	Black
Ordinary	165	74	100	38	Uncolored
Intermediate	212	100	150	66	White
High	286	141	225	107	Blue

*Frame Color does not apply to chrome plated sprinklers—Use sprinkler rating as identified on operating parts as shown below.

Approval Organizations:

1. Underwriters Laboratories, Inc.
2. Factory Mutual Research Corp.
3. Underwriters' Laboratories of Canada
4. Loss Prevention Council
5. Pleniére Assemblée
6. Verband der Sachversicherer
7. N.Y. City, B.S. and A. No. 587-75-SA.

Finishes

Natural Bronze	—All Temp. Ratings
Bright Chrome Plated	—All Temp. Ratings
Satin Chrome Plated	—All Temp. Ratings
Black Plated	—All Temp. Ratings
Bright Brass Plated (1)	—135°F, 165°F & 212°F Temp. Ratings
Lead Plated	—165°F, 212°F & 286°F Temp. Ratings
Corroproofed	—165°F Clear Wax, 212°F Brown Wax
Corroproofed Over Lead Plated	—165°F Clear Wax, 212°F Brown Wax
Enameled	—Subject to Acceptance by Authority Having Jurisdiction. Not Approved by Official Approval Organizations.

(1) For Bright Brass Plated, Only Frame, Deflector and Cap Are Plated.

Ordering Information

Specify:

1. Model G
2. Deflector
Upright
Pendent
Conventional
3. Nominal Orifice
4. Inlet Thread
5. Temperature Rating
6. Finish

Maintenance

Sprinklers should be inspected regularly for any physical damage, dust, corrosion and paint (other than the identifying frame color).

Note: Never suspend any items (signs or decorations) from the sprinklers. Never paint sprinklers. Automatic sprinklers should be replaced according to NFPA 25, 2-2.1 and 2-4.1.

Once fused, automatic sprinklers cannot be reassembled and reused. New sprinklers of the same size, type and temperature rating must be installed. A cabinet of replacement sprinklers should be provided for this purpose. Use only the Model D (ref. Bulletin 204) sprinkler wrench provided by the manufacturer for sprinkler removal and installation. Any other type of wrench may damage the sprinkler.

The equipment presented in this bulletin is to be installed in accordance with the latest pertinent Standards of the National Fire Protection Association, Factory Mutual Research Corporation, or other similar organizations and also with the provisions of governmental codes or ordinances, whenever applicable.

Products manufactured and distributed by RELIABLE have been protecting life and property for over 70 years, and are installed and serviced by the most highly qualified and reputable sprinkler contractors located throughout the United States, Canada and foreign countries.

Manufactured by

Reliable

The Reliable Automatic Sprinkler Co. Inc.

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