

FLORHAM PARK BOROUGH
111 RIDGEDALE AVENUE
FLORHAM PARK, NJ 07932
973-410-5346 (FAX) 973-410-5358

DATE RECEIVED _____
DATE ISSUED _____
CONTROL NO. _____
PERMIT NO. _____

SITE LOCATION: _____ **BLOCK:** _____ **LOT:** _____

OWNER IN FEE: _____

ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP CODE** _____

ELECTRICAL INSPECTION:

CONTRACTOR: _____
ADDRESS: _____
CITY: _____
PHONE: () _____
LICENSE NO. _____
FEDERAL EMPLOYEE OR S.S. NO. _____

BUILDING INSPECTION:

CONTRACTOR: _____
ADDRESS: _____
CITY: _____
PHONE: () _____
LICENSE NO. _____
FEDERAL EMPLOYEE OR S.S. NO. _____

TECHNICAL SITE DATA:

QTY.	SIZE	ITEMS
_____	_____	LIGHTING FIXTURES
_____	_____	RECEPTACLES
_____	_____	SWITCHES
_____	_____	DETECTORS
_____	_____	LIGHT POLES
_____	_____	MOTOR-FRAC HP
_____	_____	EMERGENCY/EXIT LIGHTS
_____	_____	COMMUNICATION POINTS
_____	_____	ALARM DEVICES/F.A.C. PANEL
_____	_____	TOTAL NUMBER
_____	_____	POOL PERMIT W/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 SUBPANEL
_____	_____	AMP MOTOR CONTROL CENTER
_____	_____	KW ELEC. SIGN/OUTLINE LIGHT
_____	_____	OTHER
_____	_____	OTHER

DESCRIPTION OF WORK:

TYPE OF WORK

<i>PLEASE CHECK</i>	COST
NEW BUILDING _____	_____
ADDITION _____	_____
ALTERATION _____	_____
ROOFING _____	_____
SIDING _____	_____
OTHER _____	_____
FENCE (6' HEIGHT) _____	_____
SIGN SQ. FT. _____	_____
POOL _____	_____
DEMOLITION _____	_____
ABESTOS ABATEMENT _____	_____

BUILDING CHARACTERISTICS:

NO. OF STORIES _____ BLDG. HEIGHT _____
AREA: LARGEST FLOOR _____
TOTAL: BLDG. AREA _____
VOLUME OF BLDG. _____
TOTAL LAND AREA DISTURBED _____

NEW BUILDING COST _____
ALTERATION COST _____
TOTAL _____

TOTAL _____
ESTIMATED COST OF WORK _____

SIGNATURE _____
OWNER/CONTRACTOR

CONTRACTOR AFFIX SEAL

SUBCODE SIGNATURE _____
APPROVAL DATE _____

SIGNATURE _____
OWNER/CONTRACTOR

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OWNER IN FEE: _____

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PLUMBING INSPECTION:

CONTRACTOR: _____
ADDRESS: _____
CITY: _____
PHONE: () _____
LICENSE NO. _____
FEDERAL EMPLOYEE OR S.S. NO. _____

FIRE INSPECTION:

CONTRACTOR: _____
ADDRESS: _____
CITY: _____
PHONE: () _____
LICENSE NO. _____
FEDERAL EMPLOYEE OR S.S. NO. _____

TECHNICAL SITE DATA:

QUANTITY	ITEMS
_____	WATER CLOSET
_____	URINAL/BIDET
_____	LAVATORY
_____	SHOWER
_____	FLOOR DRAIN
_____	SINK
_____	DISHWASHER
_____	DRINKING FOUNTAIN
_____	WASHING MACHINE
_____	HOSE BIBB
_____	WATER HEATER
_____	FUEL OIL PIPING
_____	GAS PIPING
_____	STEAM BOILER
_____	HOT WATER BOILER
_____	SEWER PUMP
_____	INTERCEPTOR/SEPARATOR
_____	BACKFLOW PREVENTER
_____	GREASETRAP
_____	SEWER CONNECTION
_____	WATER SRVC. CONNECTION
_____	STACKS
_____	OTHER
_____	OTHER
_____	OTHER
_____	OTHER
_____	OTHER

TOTAL _____
ESTIMATED COST OF WORK _____

SIGNATURE _____
OWNER/CONTRACTOR

CONTRACTOR AFFIX SEAL

SUBCODE SIGNATURE _____
APPROVAL DATE _____

TECHNICAL SITE DATA:

WATER SUPPLY SOURCE _____
METHOD OF ALARM/SUPPRESSION SYS. _____
STORAGE TANK TYPE:
() FLAMMABLE LIQUID
() COMBUSTABLE LIQUID
() LPD () LNG CAPACITY _____ FUEL _____
ALARM SYSTEM:
() 110V INTERCONNECTED () SYSTEM
ALARM DEVICES: _____ **NUMBER:** _____
(SMOKE, HEAT, PULLS, WATER/FLOW)
SUPERVISORY DEVICES: _____
(TAMPERS, LOW/HIGH AIR)
SIGNAL DEVICES: _____
(HORNS, STROBES, BELLS)
OTHER DEVICES: _____
TOTAL _____
SUPPRESSION SYSTEMS:
FIRE PUMP _____ GPM _____ TYPE _____
DRY PIPE/ALARM VALVES _____
SPRINKLER HEADS (WET/DRY) _____
STANDPIPES _____
PRE-ENGINEERED SYSTEMS:
WET CHEMICAL () DRY CHEMICAL () _____
SUPPRESSION () CO2 () FOAM () HALON
KITCHEN HOOD EXHAUST. SYSTEM _____
SMOKE CONTROL EXHAUST SYSTEM _____
GAS () OIL () FIRED APPLIANCE _____

TOTAL _____
ESTIMATED COST OF WORK _____

SIGNATURE _____
OWNER/CONTRACTOR

CONTRACTOR AFFIX SEAL

SUBCODE SIGNATURE _____
APPROVAL DATE _____

