

PERMIT COUNTER FORM

PLEASE PRINT (In Blue/Black Ink)

Township of Readington
Code Enforcement

Phone 908-534-2164 Fax 908-534-9151

CCO \$200.00

Certificate of Continual Occupancy

BLOCK:	LOT:	QUAL:	UNIT/SUITE/APT. NO.:
WORK SITE LOCATION (ADDRESS)			FLOOR:
OWNER IN FEE			DATE RECEIVED:
ADDRESS			CONTROL NO.:
CITY	STATE	OWNERS PHONE #	PERMIT NO.:
ZIP	OWNERS EMAIL (REQUIRED)		

PLUMBING/MECHANICAL SUBCODE		BUILDING SUBCODE	
Contractor:		Contractor:	
Contact Name:		Contact Name:	
Address:		Address:	
Cell:		Cell:	
Phone No:	Fax:	Phone No:	Fax:
E-mail:		E-Mail:	
License No.	Exp. Date:	Builder Registration No.	Exp Date:
Home Improvement Contractors Reg. No.:		Home Improvement Contractors Reg. No.:	
Federal Employee ID No.:		Federal Employee ID No.:	

TECHNICAL SITE DATA (LIST ALL FIXTURES)	TECHNICAL SITE DATA
DESCRIPTION OF WORK:	DESCRIPTION OF WORK:

IS THIS PROPERTY: PUBIC SEWER PRIVATE SEPTIC

FIXTURE	QTY	FIXTURE	QTY	TYPE OF WORK	
Water Closet		Interceptor <input type="checkbox"/> Separator <input type="checkbox"/> Grease Trap <input type="checkbox"/>		<input type="checkbox"/> New Building	<input type="checkbox"/> Asbestos or Lead Abatement
Urinal / Bidet		Backflow Preventer		<input type="checkbox"/> Addition	<input type="checkbox"/> Demolition
Bath Tub		Sewer Connection		<input type="checkbox"/> Alteration/Rehabilitation	<input type="checkbox"/> Sign: _____ sq. ft.
Lavatory		Water Connection		<input type="checkbox"/> Roofing	<input type="checkbox"/> Pool
Shower		Stacks		<input type="checkbox"/> Siding	
Floor Drain		Water Heater Gas <input type="checkbox"/> Electric <input type="checkbox"/>		<input type="checkbox"/> Radon	<input type="checkbox"/> Fence Ht: _____
Sink		Furnace Gas <input type="checkbox"/> Oil <input type="checkbox"/>		<input type="checkbox"/> Other :	<input type="checkbox"/> Change of Contractor

BUILDING CHARACTERISTICS			
Drinking Fountain	Fireplace <input type="checkbox"/> Woodstove <input type="checkbox"/> Gas Logs <input type="checkbox"/>	USE GROUP	Present : Proposed:
Washing Machine	Chimney Liner	CONSTR. CLASS	Present : Proposed:
Hose Bib	Pool Heater	No. of Stories:	Height of Structure: _____ ft.
Fuel Oil Piping	Pool Drains	Area - Largest Floor:	_____ sq. ft.
Gas Piping	Generator (Whole House)	New Building Area / All Floors:	_____ sq. ft.
LP Tank	Shower Steam Generator	Volume of Structure:	_____ cu. ft.
Boiler HW <input type="checkbox"/> Steam <input type="checkbox"/>	Radiant Floor Heat	Maximum Live Load	
Sewer Pump	Change of Contractor	Maximum Occupancy Load	

ESTIMATED COST OF PLUMBING WORK \$

Applicant Signature: _____

Owner Contractor

SUBCODE APPROVAL:

PLANS: Required Released

Released by: _____ Date: _____

ESTIMATED COST OF BUILDING WORK:

NEW BUILDING \$	DEMOLITION \$
ALTERATION \$	ROOFING/SIDING \$
TOTAL \$	

Applicant Signature: _____

Owner Contractor

SUBCODE APPROVAL:

CONTRACTOR AFFIX SEAL:

PLANS: Required Released

Released by: _____ Date: _____

Revised 11/19/20

ELECTRICAL SUBCODE			FIRE PROTECTION SUBCODE		
Contractor:			Contractor:		
Contact Name:			Contact Name:		
Address:			Address:		
Cell:			Cell:		
Phone No: Fax:			Phone No: Fax:		
E-mail:			E-mail:		
License No. Exp. Date:			License No. Exp. Date:		
Federal Employee ID No.:			Home Improvement Contractors Reg. No.:		
JCP&L DR#:			Federal Employee ID No.:		
TECHNICAL SITE DATA (LIST ALL FIXTURES)			TECHNICAL SITE DATA (DESCRIPTION OF WORK)		
DEVICES	QTY	DESCRIPTION OF WORK:			
Light Fixtures					
Receptacles					
Switches					
Detectors					
Light Poles					
Motors-Fract. HP					
Emergency/Exit Lights					
Communication Points					
Alarm Devices/FAC Panel					
Pool/Spa w/UW Lights					
Pool/Spa/Hot Tub-Portable		SIZE			
Range/Receptacle		KW			
Oven/Surface Unit		KW			
Water Heater		KW			
Dryer/Receptacle		KW			
Dishwasher		KW			
Garbage Disposal		HP			
Central Air Conditioning		KW			
Space Heater/Air Handler		HP/KW			
Baseboard/Radiant Heat		KW			
Motors 1+ HP		HP			
Transformer		KW			
Generator		KW			
Service		AMP			
Subpanel		AMP			
Transfer Switch		AMP			
Signs		KW			
Motor Control Center		AMP			
Solar Photovoltaic System		KW			
Electric Car Charging Outlet		AMP			
Electric Car Charging Station		KW			
Lawn Sprinkler					
Change of Contractor					
CSST Gas Pipe Bonding					
Other					
Other					
ESTIMATED COST OF ELECTRICAL WORK\$			ALARM SYSTEMS		
Applicant Signature:			Alarm Supervision: Central <input type="checkbox"/> Proprietary <input type="checkbox"/>		
Owner <input type="checkbox"/> Contractor <input type="checkbox"/>			LPG/ LNG Tanks Capacity: Fuel:		
SUBCODE APPROVAL:			Flammable/Combustible Tanks Capacity: Fuel:		
PLANS: Required <input type="checkbox"/> Released <input type="checkbox"/>					
Released by: Date:			QTY		
CONTRACTOR AFFIX SEAL:			ALARM SYSTEMS		
			<input type="checkbox"/> System		
			<input type="checkbox"/> 110V Interconnected		
			<input type="checkbox"/> CO Detectors/110v		
			Alarm Devices (i.e., smoke, heat, pulls, water flow)		
			Supervisory Devices (i.e., tampers, low/high air)		
			Signaling Devices (i.e., horns/strobes, bells)		
			Other Devices:		
			TOTAL		
			SUPPRESSION SYSTEMS		
			Fire Pump GPM Type		
			Dry Pipe/Alarm Valves		
			Pre-action Valves		
			Sprinkler Heads (Dry and Wet)		
			Standpipes		
			PRE-ENGINEERED SYSTEMS		
			Wet Chemical		
			Dry Chemical		
			CO2 Suppression		
			Foam Suppression		
			FM-200 Suppression		
			Other		
			OTHER SYSTEMS:		
			Kitchen Hood Exhaust System		
			Smoke Control System		
			Fuel Fired Appliances Gas <input type="checkbox"/> or Oil <input type="checkbox"/>		
			Fireplace Wood <input type="checkbox"/> Gas <input type="checkbox"/>		
			Gas Log Set		
			Chimney Liner		
			Generator		
			Change of Contractor		
			Solar - Roof Mounted		
			ESTIMATED COST OF FIRE PROTECTION WORK\$		
			Applicant Signature:		
			Owner <input type="checkbox"/> Contractor <input type="checkbox"/>		
			SUBCODE APPROVAL:		
			PLANS: Required <input type="checkbox"/> Released <input type="checkbox"/>		
			Released by: Date:		