

Codes and Standards Permitting Procedures

User Guide

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RUTGERS

Institutional Planning
and Operations

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Key Information

1. Work on any property owned by Rutgers University requires a permit.



STOP: Work may never begin without a permit and all prior approvals. Follow this guide to request a permit before starting any project.

This guide will cover the permitting process for

- Building permits
- Electrical permits
- Elevator permits
- Fire permits
- Plumbing permits
- Mechanical permits

2. All parties involved in requesting any of the above permits should become familiar with the details in this guide.



KEY: Rutgers employees are encouraged to share this guide with vendors. Incorrect or incomplete **Permit Packets** will be returned, and the permit will be delayed until the packet is completed correctly.

3. Any questions should be directed to one of the following:

Scott Luthman: Code Official, Office of Codes and Standards

E: scott.luthman@rutgers.edu

P: 848-202-0333

Bill Fox: Sr. Department Administrator, Office of Codes and Standards

E: william.fox@rutgers.edu

P: 848-202-2212



CAUTION: The **Permit Number** and Building Name must be in the subject line of the email. Absence of this information will delay issuing of the permit.

Key Terms

Permit Packet

All of the required documents that must be submitted when requesting a permit. Each **Permit Packet** requires:

- A completed **Jacket**
- Completed **Tech Sheets**
- 2 copies of **signed and sealed Drawings**, both signed by a Rutgers University Architect

Every form in the **Permit Packet** must include the following information:

- Building number
- Building name
- Building address
- Room number (if applicable)
- Rutgers University Project Manager name, phone number, and email



CAUTION: Failure to provide any of the above materials will automatically result in a denied permit.

Jacket

Required as part of each permit packet. It is required for all types of work and must be submitted for every project. It is formally known as the **Construction Permit Application** and labeled by the **DCA** as form **F100**.

When requesting work to an ongoing job, a new **Jacket** does not need to be submitted, only appropriate **Tech Sheets** need to be submitted.

Tech Sheet

Required as part of each **Permit Packet**. They offer more specific information about the type of work being done and there are different sheets for each building discipline. The **DCA** labels the forms as **F110, 120, 130, 140, 145, and 150**.

DCA Name	Full Name
F110	Building Subcode Technical Section
F120	Electrical Subcode Technical Section
F130	Plumbing Subcode Technical Section
F140	Fire Protection Subcode Technical Section
F145	Mechanical Inspection Technical Section
F150	Elevator Subcode Technical Section

Drawings

Visual representations of the type of work that is being done and required as part of every **Permit Packet**. They are not data sheets about the work, but data sheets may be submitted as part of the **Permit Packet**. **Drawings** must be **signed and sealed** by a Rutgers University Architect.

Signed and Sealed

Refers to **Drawings** and required **Tech Sheets** that have been reviewed and signed by a licensed architect or engineer who have affixed their seal to confirm authenticity.

Permit Number

A number issued by the Office of Codes and Standards after the **Permit Packet** is approved. Keep this number for your records since it tracks the permit and all associated documents.

UCC

The **Uniform Construction Code** sets standards for construction to protect the public's health, safety, and welfare.

Learn more about the UCC [here](#)¹.

DCA

The **New Jersey Department of Community Affairs**.

Learn more about the DCA [here](#)².

Construction Official

Serves as the chief administrator of the enforcing agency. In this case, the Office of Codes and Standards at Rutgers University is the **Construction Official**. The official establishes the day to day operating routines of the agency and coordinates activities with the **Sub Code Official**.

Sub Code Official

Enforces the provisions of those subcodes for which they are responsible.

¹ https://www.nj.gov/dca/divisions/codes/publications/pdf_ucc/UCC_gen_info.pdf

² <https://www.nj.gov/dca/about/>

Inspection Terms

Inspections

An analysis of work to determine if it has been completed according to the **UCC**. Depending on the type of work, there will be a different series of inspections required.

Rough Inspection

Inspections done while work is in progress.

Final Inspection

Done when all work has been completed. A **Final Inspection** is for either a **Certificate of Approval (CA)**, **Certificate of Occupancy (CO)**, or a **Temporary Certificate of Occupancy (TCO)**.

Building Inspections

Each of the following **Inspections** are required for the **Building Inspection**:

- Footing (bottom of footing before the placement of concrete)
- Foundation
- Slab
- Frame
- Insulation
- Above ceiling
- Barrier free
- Final

Plumbing Inspections

Each of the following **Inspections** are required for the **Plumbing Inspection**:

- Slab
- Rough
- Above ceiling
- Sewer connection
- Water connection
- Gas piping
- Trench
- Air and waterway tests
- Final

Electrical Inspections

Each of the following **Inspections** are required for the **Electrical Inspection**:

- Rough
- Above ceiling
- Trench
- Service
- Final

Fire Inspections

Each of the following **Inspections** are required for the **Fire Inspection**:

- Above ceiling
- Suppression
- Air and water tests
- Fire alarm
- Final

Approval Terms

Certificate of Approval (CA)

Serves as notice that the work completed has been constructed or installed in accordance with the **UCC** and is approved. This certificate is given for renovations to an existing structure.

Certificate of Occupancy (CO)

Serves as notice that the said building or structure has been constructed in accordance with the **UCC** and is approved for occupancy. This certificate is given for newly constructed buildings or additions to an existing structure.

Temporary Certificate of Occupancy (TCO)

Serves as notice that the said building or structure has not been fully constructed in accordance with the **UCC** and is approved only for temporary occupancy.

A list of conditions that must be met is provided and all issues must be resolved before the given date. Failure to resolve the issues or meet the given date may result in an immediate order to vacate.

Frequently Asked Questions (FAQs)



KEY: All paperwork must be properly filled out, printed, and signed.

Permit Packet Packet FAQs

1. Where do I download the **Permit Packet**?

Access the [Office of Codes and Standards](https://ipo.rutgers.edu/codes-and-standards)³ website to download the **Jacket** and appropriate **Tech Sheets**.

2. What is required in the **Permit Packet**?

- The Construction Application (**Jacket**)
- A copy of each **Tech Sheet**
- 2 copies of **signed and sealed Drawings**, already signed by the University Architects

3. What if the **Permit Packet** is missing information?

If the **Permit Packet** is missing information, it will automatically be rejected and work may not begin. All required information is important.

For example, including the Rutgers University Project Manager's name and number on each form ensures that the inspectors can reach out for any questions or issues.

4. Why is an address needed if the building name and number are on all forms?

Often, Contractors and even Rutgers personnel are not sure about building information. For example, the address may be known locally by a side street; however, the correct address could differ. Accurate building name, number, and address will ensure the inspectors find the correct building.

5. When and what type of **signed and sealed Drawings** are required?

Drawings should present the type of work that is being done; they are not data sheets about the work, but data sheets may be submitted as part of the packet.

Drawings should be submitted to the Rutgers University Architect for signed approval. Once approval has been given, the **Drawings** will go into review by the **Sub Code Officials**.

³ <https://ipo.rutgers.edu/codes-and-standards>

6. Which **Tech Sheets** must be sealed?

Plumbing and electrical **Tech Sheets** must be signed and sealed. All other **Tech Sheets** must be signed and are not required to be sealed.

7. What happens if the **Drawings** are not signed?

If the **Drawings** are not signed by a Rutgers University Architect, the permit will be denied and the project will be delayed.

Submission and Fees FAQs

1. Are fees required?

Fees are not charged to any Rutgers University operated building or department. The only instance where fees are charged involves a for-profit tenant renting space from the university. In this situation, a Permit Fee and a Permit Review Fee are charged.

2. How do I submit the **Permit Packet**?

All submitted **Permit Packets** must include all appropriate **Tech Sheets**. If there is additional work planned for later, and the **Tech Sheets** are not ready at this time, you must notify the Office of Codes and Standards upon submittal.

Submissions can be made in-person or via mail to:

William (Bill) Fox

33 Knightsbridge Road, 3rd Floor, West Wing

Piscataway, NJ 08854

3. If the Contractor is working in multiple buildings, will multiple permits be required?

For each project, there must be a separate **Permit Packet** consisting of a **Jacket** and appropriate **Tech Sheets**. This means each location receives its own permit.

If the Contractor is doing work in several rooms on the same floor, those packets may be grouped together.

4. What is the procedure once a **Permit Packet** is received?

Once a **Permit Packet** is received, the **Drawings** are reviewed by a **Sub Code Official**. Once approved, a **Permit Number** is issued and work begins. If the **Drawings** are not approved, they are returned for changes.

5. What is the procedure if work is being added to an open permit?

Only the appropriate **Tech Sheets** and new **Drawings** need to be submitted for additional work on an open permit. No **Jackets** need to be submitted.

Upon submittal, notify the Office of Codes and Standards that this is part of an existing permit and provide the **Permit Number**.

Inspection FAQs

1. Who calls for an inspection?

When the Contractor completes a portion of the work, the Contractor or the Rutgers University Project Manager will [contact](#)⁴ the Office of Codes and Standards.

2. What if the work will not be ready for the inspection?

All work must be completed before scheduling an inspection. If the work is not ready, [contact](#) the Office of Codes and Standards to reschedule as soon as possible.



NOTE: When inspectors go to a site that is not yet ready, it prevents them from going to another project where they are needed.

3. Who should be present for inspections?

Either the Rutgers University Project Manager or the General Contractor should be at the inspections.

The results will be shared immediately following an inspection. If corrections are required, it may be feasible to complete some while the inspector is still present.

4. Before Final Fire Inspection, what is required to be completed?

All other final inspections must be completed prior to the Final Fire Inspection. This is always the last inspection since construction dust can interfere with tests.

All pre-tests and reports must be completed and submitted. This includes the 200 psi/2-hour test on the water service line.

⁴ william.fox@rutgers.edu

5. Who must be present for Fire Inspections?

The following people must be present:

- The Electrical Contractor
- A representative from the fire alarm company
- A representative from the sprinkler company (if applicable)
- Rutgers University Project Manager



NOTE: The Rutgers University Project Manager schedules the appointment with the fire alarm company.

6. What happens if my project does not pass inspection?

When the rough inspection doesn't pass, the Office of Codes and Standards records the inspection as "Did not pass."



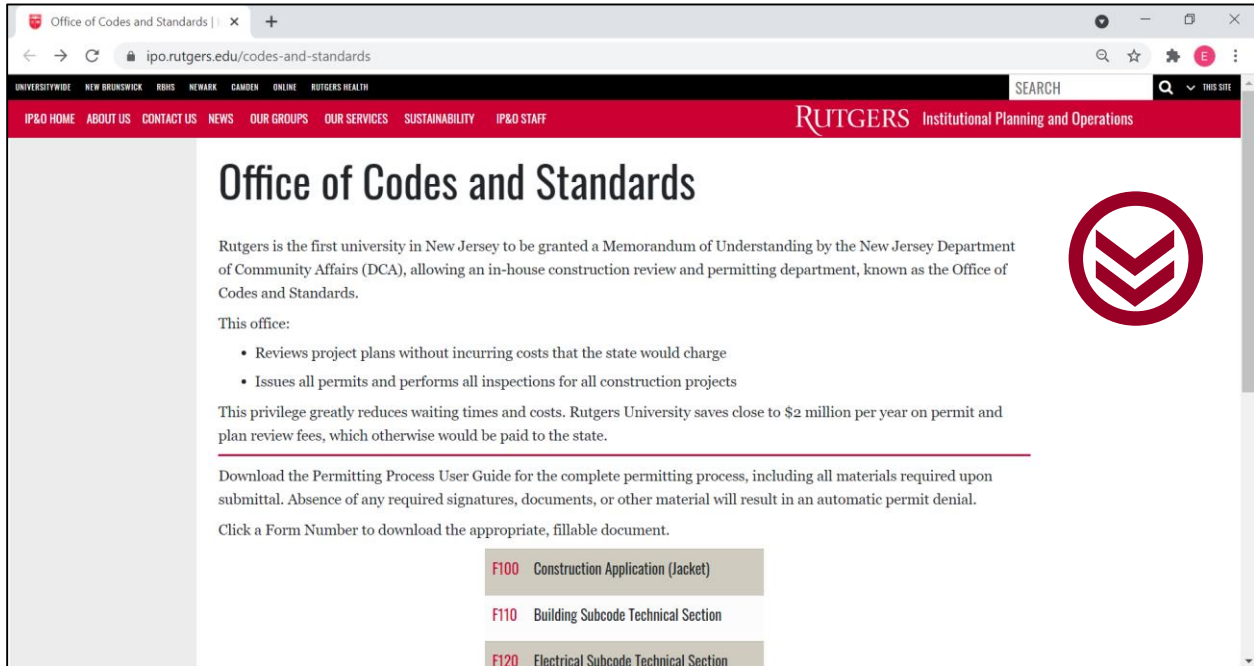
STOP: New work cannot begin until this work is corrected. Once the work is corrected, the Rutgers University Project Manager or Contractor must [contact](#)⁵ the Office of Codes and Standards for re-inspection.

It is the responsibility of the Rutgers University Project Manager to reschedule all inspections.

⁵ william.fox@rutgers.edu

Downloading the Jacket and Tech Sheets

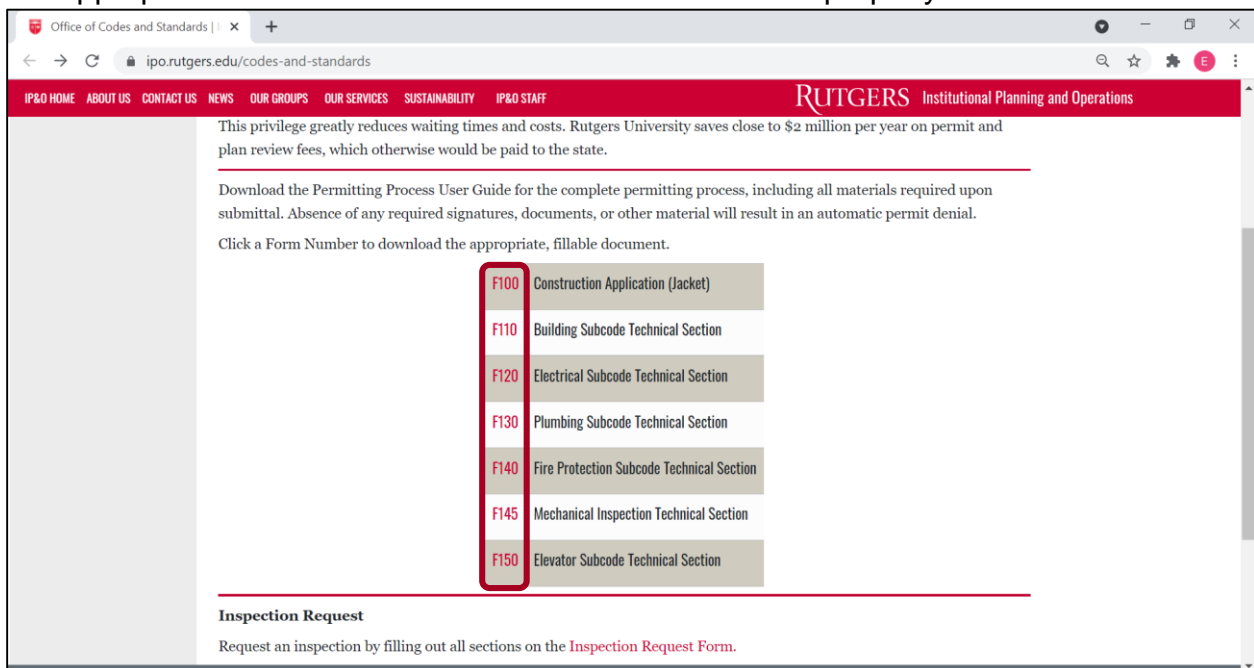
1. Navigate to the [Office of Codes and Standards](https://ipo.rutgers.edu/codes-and-standards)⁶ website and scroll down .



The screenshot shows the website's header with navigation links and the Rutgers logo. The main content area features the title 'Office of Codes and Standards' and a paragraph explaining the office's role. Below this, a list of forms is displayed, with F100, F110, and F120 highlighted.

2. Select the appropriate form.

A fillable PDF of the selected form will open in a new tab. Follow the steps in the appropriate section of this User Guide to learn how to properly fill out each form.



This screenshot shows the same website but with a larger list of forms. A red box highlights the 'F100 Construction Application (Jacket)' form. Below the list, there is a section for 'Inspection Request' with a link to the 'Inspection Request Form'.

⁶ <https://ipo.rutgers.edu/codes-and-standards>

F100: Construction Permit Application (Jacket)





KEY: Each project requires a **Jacket**. Only certain sections and pages of the **Jacket** must be filled out. Read the following steps carefully.

1. After downloading the **Jacket**, fill out the appropriate grey highlighted areas in the PDF. Click in the grey area to type.



HINT: Enter all phone numbers and faxes without spaces or punctuation. The form will automatically add the necessary text.

2. You may need to scroll to the side  or down  to view the entire document.
3. Some of the information will be the same as the accompanying **Tech Sheets**, ensure ALL overlapping information is correct on all forms. If the overlapped information does not match, the permit will be denied.
4. Skip the top line of information, including: **BLOCK, LOT, QUALIFICATION CODE, ADDRESS (SITE), PERMIT NO.**

The screenshot displays the 'CONSTRUCTION PERMIT APPLICATION' form. Key sections include:

- IDENTIFICATION:** Fields for Proposed Work Site, Name of Owner in Fee, Ownership in Fee (Public/Private), Principal Contractor, and Responsible Person in Charge.
- PROPOSED WORK:** Checkboxes for Minor Work, New Building, Addition, Repair, Alteration, Renovation, Demolition, Reconstruction, Asbestos Abat., Lead Hazard Abatement, and Radon Remediation.
- SUBCODES:** A table for tracking work items with columns for Est. Cost, Plans, Permits, Inspection, Approval, Re-inspection, and Re-visit.
- DESCRIPTION OF BUILDING USE:** Sections for Residential (A) and Non-Residential (B) use, including State Specific Use, Use Group, and Construct Classification.
- DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?:** A checklist for various systems like Elevators, Refrigerators, Cross Connections, Smoke Control, etc.

6. **IDENTIFICATION:** Enter the appropriate information and ensure that all information that overlaps with the **Jacket** is the same.

Name	Information	Required?
Proposed Work Site at	The Building Name, Building Number, Room Number must be included as part of the Address.	✓
Name of Owner in Fee	This will always be Rutgers University. The Rutgers University Project Manager's Email and Phone are placed here. The Address will always be 33 Knightsbridge Road, Piscataway 08854.	✓
Ownership in Fee	Skip this section.	✗
Principal Contractor	Enter the General Contractor's Company Name, Phone, Address, Email address, License Number with Expiration Date, and Federal Tax ID.	✓
Architect or Engineer	Enter the Project Designer's Company Name and Address. Enter the Company's Representative's Name, Phone, Email, and Fax.	✓
Responsible Person in Charge once Work has Begun	Enter the General Contractor's Representative Name, Phone, and Fax.	✓

A sample form is filled out below.

The screenshot shows a web browser displaying a 'CONSTRUCTION PERMIT APPLICATION' form. The form is filled out with sample data. A red circle highlights the 'I. IDENTIFICATION' section, which includes fields for:

- Proposed Work Site at: 1 Test St, Sample NJ 12345, Doe Hall, 5555, Room 012
- Name of Owner in Fee: Rutgers University, 1233 456-7890, 333 Sample Road, Sample NJ 12345, email: projectmanager@rutgers.edu
- Ownership in Fee: Public, Private, or Other
- Principal Contractor: General Contracting Company A, 555 555-5555, 323 Sample Road, Sample NJ 12345, email: contractor@test.com
- Architect or Engineer: Design Company C, 555 555-5555, 456 Sample St, Sample NJ 12345, email: companyc@test.com, Tel: (888) 888-8888, FAX: (888) 888-8888
- Responsible Person in Charge once Work has Begun: Jeffrey Li, 555 555-5555, Tel: (999) 999-9999, FAX: (999) 999-9999

 The form also includes sections for 'II. SUBCODES', 'III. PLAN REVIEW', 'IV. DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING?', 'V. FEE SUMMARY', 'VI. DESCRIPTION OF BUILDING USE', and 'VII. CERTIFICATION IN LIEU OF OATH'.

7. **PROPOSED WORK:** Skip this section.

- SUBCODES:** Check the appropriate boxes and enter the applicable amounts in each row. The **Total Cost** will autopopulate. If it does not autopopulate, enter the appropriate number.



HINT: The **Est. Cost** of each item must match the **Total Cost** on the appropriate **Tech Sheet**. If the **Est. Cost** for **Electrical** is \$20,000 then the **Total Cost** for all **Electrical Subcode Technical Sheets** submitted should equal \$20,000.

An example form is filled out below.

Subcode	Est. Cost
Building	55,000
Electrical	20,000
Plumbing	60,000
Fire Protection	80,000
Elevator	25,000
TOTAL COST	\$240,000

- PLAN REVIEW:** Skip this section.
- DOES THE BUILDING CONTAIN ANY OF THE FOLLOWING?:** Skip this section.
- FEE SUMMARY (for office use only):** Skip this section.
- BUILDING/SITE CHARACTERISTICS:** Skip this section.
- DESCRIPTION OF BUILDING USE:** Skip this section.
- On page 2, the **CERTIFICATE IN LIEU OF OATH** can be filled out by either the Rutgers University Project Manager or the General Contractor. Follow the steps appropriate to your role.



NOTE: Only one section of this page must be filled out. For example if the **OWNER SECTION** is completed, the **AGENT SECTION** may be left blank.

a. For a Rutgers University Project Manager: Fill out the **OWNER SECTION** by checking the appropriate boxes.



CAUTION: After printing the document, remember to sign and date in the area below. Electronic signatures are not accepted. Failure to properly sign and date will result in a denied permit.

An example form is filled out below.

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. 46:38-1 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' 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(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. <input checked="" type="checkbox"/> Building	C.2. <input checked="" type="checkbox"/> Fire Protection
C.3. <input checked="" type="checkbox"/> Electrical	C.4. <input checked="" type="checkbox"/> Plumbing

I further certify that I will perform the following work:

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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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

Signature _____ Date _____

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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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 _____

b. For a General Contractor: Fill out the **AGENT SECTION**.

Check the **Check if contractor** box and fill out the **Agent Name, Address, and Telephone**.



NOTE: Do not check either the **Lead Hazard Abatement** or the **Home Elevation** boxes (located under the signature area). REHS will handle this.



CAUTION: After printing the document, remember to physically sign and date in the area below. Electronic signatures are not accepted. Failure to properly sign and date will result in a denied permit.

A sample form is filled out below.

single family residence that is owned and occupied by myself and located on the property listed on Page 1.

C. (X) I further certify that I will perform or supervise the following work:
C.1. (X) Building C.2. (X) Fire Protection
I further certify that I will perform the following work:
C.3. (X) Electrical C.4. (*) Plumbing

D. (X) 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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.

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

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, including such certification as the construction official may require, have been given or will be given prior to permit issuance.
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.

(X) Check if contractor.

Agent Name: Jenny Li
Address: 55 Simple St
Sample, NJ 12345
Telephone: (888) 888-8888
Signature: _____

iii. LEAD HAZARD ABATEMENT: Include Homeowner or Building Owner Affidavit as per N.J.A.C. 5:23-2.15(d)4.
iv. HOME ELEVATION: Include Home Elevation Contractor Certification as per N.J.S.A. 52:27D-123.16.

S.C.C. F100-2 (rev. 11/2014)

OFFICE DATE RECEIVED	LOCAL APPROVAL		COUNTY APPROVAL		REGIONAL APPROVAL		STATE APPROVAL		COMMENTS
	Prelim. Initial	Final Date	Prelim. Initial	Final Date	Prelim. Initial	Final Date	Prelim. Initial	Final Date	
<input type="checkbox"/> Zoning Officer									
<input type="checkbox"/> Planning Board									
<input type="checkbox"/> Zoning Board									
<input type="checkbox"/> Sewer Authority									
<input type="checkbox"/> Water Authority									

15. Skip page 3 of the **Jacket**.

16. Follow the [Downloading and Printing a Form](#) steps.



KEY: After printing, remember to sign and date in all designated areas. Documents submitted without proper signatures and dates will result in a denied permit.

F110: Building Subcode Technical Section



KEY: Only certain sections and pages of this **Tech Sheet** must be filled out. Read the following steps carefully.

1. After [downloading the Tech Sheet](#), fill out the appropriate grey highlighted areas in the PDF. Click in the grey areas to type.



HINT: Enter all phone numbers and faxes without spaces or punctuation. The form will automatically add the necessary text.

2. You may need to scroll to the side or down to view the entire document.
3. Some of the information will be the same as the **Jacket**, ensure ALL overlapping information is correct on both forms. If the overlapped information does not match, the permit will be denied.

The screenshot shows a web browser window displaying the 'F110: Building Subcode Technical Section' form. The form is titled 'BUILDING SUBCODE TECHNICAL SECTION' and is divided into several sections:

- A. IDENTIFICATION—APPLICANT COMPLETE ALL APPLICABLE INFORMATION WHEN CHANGING CONTRACTORS. NOTIFY THIS OFFICE, CALL UTILITY DIS NO. 1-800-272-1000.** This section includes fields for Block, Lot, Qualification Code, Work Site Location, Owner in Fee, Tel., Address, Contractor, and various license/registration numbers.
- C. CERTIFICATION IN LIEU OF OATH.** A section for the applicant to certify that they are the agent of the owner and authorized to make the application.
- D. TECHNICAL SITE DATA.** A section for providing site data, including a large 'DESCRIPTION OF WORK' area.
- JOB SUMMARY (Office Use Only).** A table for tracking plan review and inspections. The table has columns for 'PLAN REVIEW' (No Plans Required, All, Footings/Foundations, Structural/Framework, Exterior, Interior) and 'INSPECTIONS' (Type, Failure, Approval, Initial). It also includes a section for 'JOB PLAN REVIEW REQUESTED' with checkboxes for various trades like Elec., Plumb., Fire, Elevator, Insulation, etc.
- SUBCODE APPROVAL FOR PERMIT.** A section for approval by the TCO, with checkboxes for CD, CO, CC, CA, and other categories.
- B. BUILDING CHARACTERISTICS.** A section for providing building details such as Use Group, Present/Proposed, No. of Stories, Height of Structure, Area - Largest Floor, New Bldg Area/All Floors, Volume of New Structure, Max. Wind Load, and Max. Occupancy Load.
- TYPE OF WORK.** A list of checkboxes for different types of work, including New Building, Addition, Rehabilitation, Roofing, Siding, Fence, Sign, Pool, Retaining Wall, Asbestos Abatement, Lead Haz. Abatement, Radon Remediation, and Demolition.
- FEE (Office Use Only).** A section for calculating fees, including Administrative Surcharge, Minimum Fee, State Permit Surcharge Fee, and TOTAL FEE.

Two red circular icons with white arrows are overlaid on the form: one pointing right and one pointing down, indicating scrolling directions.

4. **IDENTIFICATION – APPLICANT:** Enter the appropriate information and ensure that all information that overlaps with the **Jacket** is the same.

Name	Information	Required?
Block	Skip this section.	✗
Lot	Skip this section.	✗
Qualification Code	Skip this section.	✗
Work Site Location	The Building Name, Building Number, Room Number must be included as part of the Address.	✓
Owner in Fee	This will always be Rutgers University. The Rutgers University Project Manager's Email and Phone are placed here. The Address will always be 33 Knightsbridge Road, Piscataway 08854.	✓
Contractor	Enter the General Contractor's Company Name, Phone, Address, Email address, License Number with Expiration Date, and Federal Tax ID.	✓

A sample form is filled out below.

The screenshot shows a web browser window with a PDF document titled "BUILDING SUBCODE". The form is divided into several sections:

- IDENTIFICATION—APPLICANT:** This section is circled in red in the image. It includes fields for Block, Lot, Work Site Location, Owner in Fee (Rutgers University), Contractor (General Contracting Company A), and various contact information like phone, email, and license numbers.
- IDENTIFICATION IN LIEU OF OATH:** A section for the applicant to certify they are the agent of the owner.
- TECHNICAL SITE DATA:** A section for describing the work, including type of work (New Building, Addition, etc.), height, and other technical details.
- JOB SUMMARY (Office Use Only):** A section for tracking inspections and approvals, including a table for PLAN REVIEW and SUBCODE APPROVAL.
- BUILDING CHARACTERISTICS:** A section for providing details about the building, such as height, area, and volume.
- FEE (Office Use Only):** A section for calculating administrative and permit fees.

5. **JOB SUMMARY (Office Use Only):** Skip this section.

6. **BUILDING CHARACTERISTICS:** Enter the **New Bldg.** or **Rehabilitation** cost and the **Est. Cost of Bldg. Work Total (1 + 2)** will autopopulate. This should match the **Est. Cost** for the **Building** section of the **Jacket**.

BUILDING SUBCODE TECHNICAL SECTION

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

Block _____ Lot _____ Qualification Code _____
 Work Site Location 1 Test St, Sample NJ 12345, Doe Hall, 5555, Room 012

Owner in Fee: Rutgers University
 Tel. (123) 456-7890 e-mail projectmanager@rutgers.edu
 Address 33 Knightsbridge Road Piscataway NJ 08854
 Contractor: General Contracting Company A Tel. (555) 555-5555
 Address 123 Sample Road e-mail contractor@test.com
 Sample NJ 12345
 Contractor License No. or Builder Registration No. 5555555 Exp. Date 01/28/2025
 Home Improvement Contractor Registration No. or Exemption Reason _____
 Federal Emp. ID No. 5555555 FAX: (555) 555-5555

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.
 Sign here: _____
 Print name here: _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

TYPE OF WORK

New Building
 Addition
 Rehabilitation
 Roofing
 Siding _____ Height (exceeds 6')
 Sign _____ Sq. Ft.
 Pool
 Retaining Wall _____ Sq. Ft.
 Asbestos Abatement Subchapter 8
 Lead Haz. Abatement NJAC 5:17
 Radon Remediation
 Other _____
 Demolition

FEE (Office Use Only)

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Type	Failure	Failure	Approval	Initial
<input type="checkbox"/> No Plans Required								
<input type="checkbox"/> All								
<input type="checkbox"/> Footings/Foundations								
<input type="checkbox"/> Structural/Framework								
<input type="checkbox"/> Exterior								
<input type="checkbox"/> Interior								
<input type="checkbox"/> Joint Plan Review Required								
<input type="checkbox"/> Elec. <input type="checkbox"/> Plum. <input type="checkbox"/> Fire <input type="checkbox"/> Elevator								
<input type="checkbox"/> Insulation								
<input type="checkbox"/> Finishes -Base Layer								
<input type="checkbox"/> Finishes -Final								
<input type="checkbox"/> Energy								
<input type="checkbox"/> Mechanical								
<input type="checkbox"/> TCO								
<input type="checkbox"/> Other								
<input type="checkbox"/> Final								
<input type="checkbox"/> Barrier-Free								

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
 if Industrialized Building: _____
 No. of Stories _____
 Height of Structure _____ ft.
 Area - Largest Floor _____ sq. ft.
 New Bldg. Area/All Floors _____ sq. ft.
 Volume of New Structure _____ cu. ft.
 Max. Live Load _____
 Max. Occupancy Load _____

Const. Class Present _____ Proposed _____
 1. New Bldg. \$ 55,000
 2. Rehabilitation \$ 55,000
 3. Total (1+2) \$ 110,000

U.C.C. F110 (rev. 10/05) Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original job free photograph.

7. **CERTIFICATE IN LIEU OF OATH:** This section must be completed after printing.

Either the Rutgers University Project Manager or the General Contractor must physically sign and print their name.



CAUTION: Electronic signatures are not accepted. Failure to properly sign and print will result in a denied permit.

BUILDING SUBCODE TECHNICAL SECTION

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

Block _____ Lot _____ Qualification Code _____
 Work Site Location 1 Test St, Sample NJ 12345, Doe Hall, 5555, Room 012

Owner in Fee: Rutgers University
 Tel. (123) 456-7890 e-mail projectmanager@rutgers.edu
 Address 33 Knightsbridge Road Piscataway NJ 08854
 Contractor: General Contracting Company A Tel. (555) 555-5555
 Address 123 Sample Road e-mail contractor@test.com
 Sample NJ 12345
 Contractor License No. or Builder Registration No. 5555555 Exp. Date 01/28/2025
 Home Improvement Contractor Registration No. or Exemption Reason _____
 Federal Emp. ID No. 5555555 FAX: (555) 555-5555

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.
 Sign here: _____
 Print name here: Janie Doe

DESCRIPTION OF WORK

TYPE OF WORK

New Building
 Addition
 Rehabilitation
 Roofing
 Siding _____ Height (exceeds 6')
 Sign _____ Sq. Ft.
 Pool
 Retaining Wall _____ Sq. Ft.
 Asbestos Abatement Subchapter 8
 Lead Haz. Abatement NJAC 5:17
 Radon Remediation

FEE (Office Use Only)

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

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial	INSPECTIONS	Type	Failure	Failure	Approval	Initial
<input type="checkbox"/> No Plans Required								
<input type="checkbox"/> All								
<input type="checkbox"/> Footings/Foundations								
<input type="checkbox"/> Structural/Framework								
<input type="checkbox"/> Exterior								
<input type="checkbox"/> Interior								
<input type="checkbox"/> Joint Plan Review Required								
<input type="checkbox"/> Elec. <input type="checkbox"/> Plum. <input type="checkbox"/> Fire <input type="checkbox"/> Elevator								
<input type="checkbox"/> Insulation								
<input type="checkbox"/> Finishes -Base Layer								
<input type="checkbox"/> Finishes -Final								
<input type="checkbox"/> Energy								
<input type="checkbox"/> Mechanical								
<input type="checkbox"/> TCO								
<input type="checkbox"/> Other								
<input type="checkbox"/> Final								
<input type="checkbox"/> Barrier-Free								

B. BUILDING CHARACTERISTICS

Use Group Present _____ Proposed _____
 if Industrialized Building: _____
 No. of Stories _____
 Height of Structure _____ ft.
 Area - Largest Floor _____ sq. ft.
 New Bldg. Area/All Floors _____ sq. ft.
 Volume of New Structure _____ cu. ft.
 Max. Live Load _____
 Max. Occupancy Load _____

Const. Class Present _____ Proposed _____

U.C.C. F110 (rev. 10/05) Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original job free photograph.

8. **TECHNICAL SITE DATA:** Enter a brief **DESCRIPTION OF WORK** and select the **TYPE OF WORK**.

The screenshot shows the 'BUILDING SUBCODE TECHNICAL SECTION' form. Key sections include:

- A. IDENTIFICATION—APPLICANT:** Fields for Block, Lot, Qualification Code, Work Site Location, Owner in Fee (Rutgers University), and Contractor (General Contracting Company A).
- C. CERTIFICATION IN LIEU OF OATH:** A signature line for the applicant.
- D. TECHNICAL SITE DATA:** A red box highlights this section, containing a 'DESCRIPTION OF WORK' text area and a 'TYPE OF WORK' list with checkboxes for: New Building, Addition, Rehabilitation, Roofing, Siding, Fence (Height exceeds 6'), Sign, Pool, Retaining Wall, Asbestos Abatement Subchapter 8, Lead/Pb Abatement NJAC 8:17, Radon Remediation, Other (list), and Demolition.
- JOB SUMMARY (Office Use Only):** A table for tracking inspections and dates.
- II. BUILDING CHARACTERISTICS:** Fields for Use Group, Height of Structure, Area, New Bldg. Area/All Floors, Volume of New Structure, Max. Live Load, and Max. Occupancy Load.
- FEE (Office Use Only):** A section for calculating Administrative Surcharge, Minimum Fee, State Permit Surcharge Fee, and TOTAL FEE.

9. **FEE (Office Use Only):** Skip this section.
 10. Follow the [Downloading and Printing a Form](#) steps.



KEY: After printing, remember to sign and date in the all designated areas. Documents submitted without proper signatures and dates will result in a denied permit.

F120: Electrical Subcode Technical Section



KEY: Only certain sections and pages of this **Tech Sheet** must be filled out. Read the following steps carefully.

1. After [downloading the Tech Sheet](#), fill out the appropriate grey highlighted areas in the PDF. Click in the grey areas to type.



HINT: Enter all phone numbers and faxes without spaces or punctuation. The form will automatically add the necessary text.

2. You may need to scroll to the side or down to view the entire document.
3. Some of the information will be the same as the **Jacket**, ensure ALL overlapping information is correct on both forms. If the overlapped information does not match, the permit will be denied.

ELECTRICAL SUBCODE TECHNICAL SECTION

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

Block _____ Lot _____ Qualification Code _____
 Work Site Location _____
 Owner in Fee _____ Tel _____ e-mail _____
 Address _____
 Contractor _____ Tel _____
 Address _____ e-mail _____
 Contractor License No. _____ Exp. Date _____
 Home Improvement Contractor Registration No. or Exemption Reason _____
 Federal Emp. ID No. _____ FAX _____

B. ELECTRICAL CHARACTERISTICS

Use Group Present Proposed
 Pole/Pad # _____ Temporary Other _____
 Building Occupied as _____ Utility Co. _____
 Est. Cost of Elec. Work \$ _____

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 sign/Contractor sign and seal here.
 Print name here: _____
 Licensed Electrical Contractor Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK:

QTY	SIZE	ITEMS	FEE (Office Use Only)
_____	_____	Lighting Fixtures	_____
_____	_____	Receptacles	_____
_____	_____	Switches	_____
_____	_____	Detectors	_____
_____	_____	Light Poles	_____
_____	_____	Mobility-Fixed HP	_____
_____	_____	Emergency & Exit Lights	_____
_____	_____	Communications Points	_____
_____	_____	Alarm Devices/F.A.C. Panel	_____
_____	_____	TOTAL NUMBERS	_____
_____	_____	Post Permits/UV Lights	_____
_____	_____	Storable Power/Switch Tub	_____
_____	_____	KW Elec. Range/Receptacle	_____
_____	_____	KW Over/Surface Unit	_____
_____	_____	KW Elec. Water Heater	_____
_____	_____	KW Elec. Dryer/Receptacle	_____
_____	_____	KW Dishwasher	_____
_____	_____	HP Garbage Disposal	_____
_____	_____	KW Central A/C Unit	_____
_____	_____	HP/KW Space Heater/HP Handler	_____
_____	_____	KW Baseboard Heat	_____
_____	_____	HP Motors 1/2 HP	_____
_____	_____	KW Transformer/Generator	_____
_____	_____	AMP Service	_____
_____	_____	AMP Subpanel	_____
_____	_____	AMP Motor Control Center	_____
_____	_____	KW Elec. Right/Outline Light	_____

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

4. **IDENTIFICATION – APPLICANT:** Enter the appropriate information and ensure that all information that overlaps with the **Jacket** is the same.

Name	Information	Required?
Block	Skip this section.	✗
Lot	Skip this section.	✗
Qualification Code	Skip this section.	✗
Work Site Location	The Building Name, Building Number, Room Number must be included as part of the Address.	✓
Owner in Fee	This will always be Rutgers University. The Rutgers University Project Manager's Email and Phone are placed here. The Address will always be 33 Knightsbridge Road, Piscataway 08854.	✓
Ownership in Fee	Skip this section.	✗
Contractor	Enter the General Contractor's Company Name, Phone, Address, Email address, License Number with Expiration Date, and Federal Tax ID.	✓

A sample form is filled out below.

The screenshot shows a web browser window with the URL nj.gov/dca/divisions/codes/forms/pdf_ucc_stfforms/ucc_f120_elec.pdf. The form is titled "ELECTRICAL SUBCODE TECHNICAL SECTION" and is filled out with the following information:

- Owner in Fee:** Rutgers University, Tel: (1202) 456-7890, e-mail: projectmanager@rutgers.edu, Address: 33 Knightsbridge Road, Piscataway NJ 08854.
- Contractor:** General Contracting Company A, Tel: (555) 555-5555, e-mail: gcontractor@test.com, Address: 123 Sample Road, Sample NJ 12345, Contractor License No. 5555555, Exp. Date: 01/28/2025, Home Improvement Contractor Registration No. or Exemption Reason: [blank], Federal Emp. ID No. 5555555, FAX: (555) 555-5555.
- Use Group:** Present, Proposed, [blank] Temporary, [blank] Other.
- Job Summary (Office Use Only):** Includes sections for PLAN REVIEW, INSPECTIONS, SUBCODE APPROVAL FOR PERMIT, and SUBCODE APPROVAL FOR CERTIFICATE.
- Technical Site Data:** Includes a table for Description of Work with columns for QTY, SIZE, ITEMS, and FEE (Office Use Only).

5. **ELECTRICAL CHARACTERISTICS:** Only the **Est. Cost of Elec. Work** needs to be filled out. This should match the **Est. Cost** for the **Electrical** section of the **Jacket**.

A sample form is filled out below.

The image shows a screenshot of a web browser displaying a form titled "ELECTRICAL SUBCODE TECHNICAL SECTION". The form is filled out with sample information. A red box highlights the "Est. Cost of Elec. Work" field, which contains the value "20,000".

Form Fields and Values:

- Identification:**
 - Block: 1 Test St, sample NJ 12345, Doe Hall, 5555, Room 012
 - Owner in Fee: Rutgers University, Tel: (123) 456-7890, e-mail: projectmanager@rutgers.edu
 - Address: 33 Knightbridge Road, Piscataway NJ, 08854
 - Contractor: General Contracting Company A, tel: (555) 555-5555, e-mail: gcontractor@test.com
 - Address: 123 Sample Road, Sample NJ 12345
 - Contractor License No: 5555555, Exp Date: 01/28/2025
 - Federal Emp. ID No: 5555555, FAX: (555) 555-5555
- Electrical Characteristics:**
 - Use Group: Present
 - Subcode: Industrial, Temporary, Other
 - Est. Cost of Elec. Work: \$ 20,000
- Job Summary (Office Use Only):**
 - PLAN REVIEW:
 - No Plans Request
 - Partial - Under/In Progress
 - Electric Plans Approved
 - Other
 - SUBCODE APPROVAL FOR PERMIT:
 - CC, CD, CA
- Technical Site Data:**
 - DESCRIPTION OF WORK:

QTY.	SIZE	ITEMS	FEES (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 Permits/with UV Lights
 - Storable Pool/Sprinkler 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

6. **JOB SUMMARY (Office Use Only):** Skip this section.

7. **CERTIFICATE IN LIEU OF OATH:** This section must be completed after printing.

Either the Rutgers University Project Manager or the General Contractor must physically sign and print their name.



NOTE: If the General Contractor fills out this section, they must check **Licensed Electrical Contractor**. If a Rutgers University Project Manager or Rutgers employee fills out this section, they must check **Exempt Applicant**.



CAUTION: Electronic signatures are not accepted. Failure to properly sign and print will result in a denied permit.

ELECTRICAL SUBCODE TECHNICAL SECTION

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS NOTIFY THIS OFFICE. CALL UTILITY DIV. NO. 1-800-972-3600.

Block _____ Lot _____ Qualification Code _____
 Work Site Location: T-Test St, sample NJ 12345, Doe Hall, 5555, Room 012

Owner in Fee: Rutgers University
 Tel: (123) 456-7890 e-mail: projectmanager@rutgers.edu

Address: 33 Knightbridge Road, Piscataway NJ 08854

Contractor: General Contracting Company A, Tel: (555) 555-5555
 Address: 123 Sample Road, Sample NJ 12345, e-mail: gcontractor@test.com
 Contractor License No. 5555555 Exp. Date: 01/28/2025

Home Improvement Contractor Registration No. or Exemption Reason _____
 Federal Emp. ID No. 5555555 FAX: (555) 555-5555

B. ELECTRICAL CHARACTERISTICS

Use Group: Present Proposed
 Pole/Pad # _____
 Temporary _____
 Other _____
 Building Occupied as: _____
 Est. Cost of Elec. Work: \$ 20,000

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 the application.
 Applicant: _____
 sign and seal here: _____
 Print name here: David Doe
 Licensed Electrical Contractor
 Exempt Applicant

DESCRIPTION OF WORK:

QTY.	SIZE	ITEMS	FEES (Office Use Only)
_____	_____	Lighting Fixtures	_____
_____	_____	Receptacles	_____
_____	_____	Switches	_____
_____	_____	Detectors	_____
_____	_____	Light Poles	_____
_____	_____	Motors—Frac. HP	_____
_____	_____	Emergency & Exit Lights	_____
_____	_____	Communications Points	_____
_____	_____	Alarm Devices/F.A.C. Panel	_____
_____	_____	TOTAL NUMBERS	\$ _____
_____	_____	Pool Permits/UV Lights	_____
_____	_____	Specialty Pools/Parties Tub	_____
_____	_____	KW Elec. Range/Receptacle	_____
_____	_____	KW Oven/Surface Unit	_____
_____	_____	KW Elec. Water Heater	_____
_____	_____	KW Elec. Dryer/Receptacle	_____
_____	_____	KW Dishwasher	_____
_____	_____	HP Garbage Disposal	_____
_____	_____	KW Central AC 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/Directive Light	_____
_____	_____	Administrative Surcharge	\$ _____
_____	_____	Minimum Fee	\$ _____
_____	_____	State Permit Surcharge Fee	\$ _____
_____	_____	TOTAL FEE	\$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)
<input type="checkbox"/> No Plans Required	Type: _____	_____
<input type="checkbox"/> Partial Undercode Utilities Approved	Temp. _____	_____
Date: _____	Barrier-Free _____	_____
<input type="checkbox"/> Electric Plans Approved	Temp. Serv. _____	_____
Date: _____	Const. Serv. _____	_____
Joint Plan Review Required	TCO _____	_____
<input type="checkbox"/> 1989 <input type="checkbox"/> Plans <input type="checkbox"/> Fire <input type="checkbox"/> Elev.	Other _____	_____
SUBCODE APPROVAL FOR PERMIT	Barrier-Free _____	_____
Date: _____	Approved by: _____	_____
SUBCODE APPROVAL FOR CERTIFICATE	Temp. Cut-in-Card Date Issued _____	_____
<input type="checkbox"/> CD <input type="checkbox"/> CDD <input type="checkbox"/> CA	Final Cut-in-Card Date Issued _____	_____
Date: _____	Annual Flood Inspection _____	_____
Approved by: _____	Date of Grounding and Bonding _____	_____
_____	Certification _____	_____

U.C.C. F202 (Rev. 01/21) Internal version. Applicant: When submitting this form to your Local Contractor Code Enforcement Office, please provide one original plus three photocopies.

8. TECHNICAL SITE DATA: Enter a brief DESCRIPTION OF WORK

Enter the **QTY** and **SIZE** for the appropriate **ITEMS**.

The screenshot shows the 'ELECTRICAL SUBCODE TECHNICAL SECTION' form. The 'D. TECHNICAL SITE DATA' section is highlighted with a red box. This section includes a table for entering work items, with columns for QTY, SIZE, and ITEMS. The 'ITEMS' column lists various electrical components such as Lighting Fixtures, Receptacles, Switches, Detectors, Light Poles, Motors-Fract, HP, Emergency & Exit Lights, and Communications Panels. Below the table, there are sections for 'TOTAL NUMBERS' and 'FEE (Office Use Only)'. The 'FEE' section includes fields for Administrative Surcharge, Minimum Fee, State Permit Surcharge Fee, and TOTAL FEE.

9. FEE (Office Use Only): Skip this section.

10. Follow the [Downloading and Printing a Form](#) steps.



KEY: After printing, remember to sign and date in all designated areas. Documents submitted without proper signatures and dates will result in a denied permit.

F130: Plumbing Subcode Technical Section



KEY: Only certain sections and pages of this **Tech Sheet** must be filled out. Read the following steps carefully.

1. After [downloading the Tech Sheet](#), fill out the appropriate grey highlighted areas in the PDF. Click in the grey areas to type.



HINT: Enter all phone numbers and faxes without spaces or punctuation. The form will automatically add the necessary text.

2. You may need to scroll to the side or down to view the entire document.
3. Some of the information will be the same as the **Jacket**, ensure ALL overlapping information is correct on both forms. If the overlapped information does not match, the permit will be denied.

The screenshot shows the 'PLUMBING SUBCODE TECHNICAL SECTION' form. It is divided into several main sections:

- A. IDENTIFICATION**: Fields for Block, Lot, Qualification Code, Work Site Location, Owner in Fee, Tel., e-mail, Contractor, and Address.
- B. PLUMBING CHARACTERISTICS**: Fields for Contractor License No., Exp. Date, Home Improvement Contractor Registration No., Federal Emp. ID No., Use Group, Building Sewer Size, Water Service Size, Public Sewer, Private Septic, and Private Water.
- C. CERTIFICATION IN LIEU OF OATH**: A declaration section for the applicant.
- D. TECHNICAL SITE DATA**: A table for listing fixtures and equipment with columns for QTY, FUTURE-EQUIPMENT, and FEE (Office Use Only).
- JOB SUMMARY (Office Use Only)**: A table for tracking plan review and inspections.
- SUBCODE APPROVAL FOR PERMIT**: Fields for approval by date.
- SUBCODE APPROVAL FOR CERTIFICATE**: Fields for approval by date.
- Administrative Fees**: A section for calculating total fees including Administrative Surcharge, Minimum Fee, State Permit Surcharge Fee, and TOTAL FEE.

4. **IDENTIFICATION – APPLICANT:** Enter the appropriate information and ensure that all information that overlaps with the **Jacket** is the same.

Name	Information	Required?
Block	Skip this section.	✗
Lot	Skip this section.	✗
Qualification Code	Skip this section.	✗
Work Site Location	The Building Name, Building Number, Room Number must be included as part of the Address.	✓
Owner in Fee	This will always be Rutgers University. The Rutgers University Project Manager's Email and Phone are placed here. The Address will always be 33 Knightsbridge Road, Piscataway 08854.	✓
Contractor	Enter the General Contractor's Company Name, Phone, Address, Email address, License Number with Expiration Date, and Federal Tax ID.	✓

A sample form is filled out below.

The screenshot shows a web browser window with the URL nj.gov/dca/divisions/codes/forms/pdf_ucc_stdforms/ucc_f130_plumb.pdf. The form is titled "PLUMBING SUBCODE TECHNICAL SECTION" and is filled out with the following information:

- Block:** 1 Test St. Sample NJ 12345 Doe Hall, 5555, Room 012
- Lot:** (blank)
- Qualification Code:** (blank)
- Work Site Location:** 1 Test St. Sample NJ 12345 Doe Hall, 5555, Room 012
- Owner in Fee:** Rutgers University, 33 Knightsbridge Road, Piscataway NJ 08854, Tel: (23) 456-7890, e-mail: projectmanager@rutgers.edu
- Contractor:** Gen55 Contracting Company A, 123 Sample Road, Sample NJ 12345, Tel: (555) 555-5555, e-mail: gcontractor@test.com, Contractor License No. 5555555, Exp. Date: 01/28/2025

A red box highlights the "IDENTIFICATION-APPLICANT" section, which includes the contractor's name, address, phone, email, license number, and expiration date. The form also includes sections for "PLUMBING CHARACTERISTICS", "JOB SUMMARY (Office Use Only)", "SUBCODE APPROVAL FOR CERTIFICATE", and "TECHNICAL SITE DATA".

5. **PLUMBING CHARACTERISTICS:** Only the **Est. Cost of Plumbing Work** needs to be filled out. This should match the **Est. Cost** for the **Plumbing** section of the **Jacket**.

A sample form is filled out below.

The screenshot shows a web browser window with the URL nj.gov/dca/divisions/codes/forms/pdf_ucc_stdforms/ucc_f130_plumb.pdf. The form is titled "PLUMBING SUBCODE TECHNICAL SECTION" and is filled out with the following information:

- A. IDENTIFICATION—APPLICANT COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIS NO. 1-800-270-1000.**
 - Block: _____
 - Work Site Location: 1 Test St, Sample NJ 12345 Doe Hall, 5555, Room 012
 - Owner or Fee: Rutgers University, projectmanager@rutgers.edu
 - Tel: (123) 456-7890, e-mail: projectmanager@rutgers.edu
 - Address: 33 Knightsbridge Road, Piscataway NJ 08854
 - Contractor: General Contracting Company A, (555) 555-5555
 - Address: 123 Sample Road, e-mail: gcontractor@test.com
 - Sample NJ 12345
 - Contractor License No. 5555555, Exp. Date: 01/28/2025
 - Home Improvement Contractor Registration No. or Exemption Reason: _____
 - Federal Emp. ID No. 555555, FAX: (555) 555-5555
- B. PLUMBING CHARACTERISTICS**
 - Use Group: Prewired
 - Building Sewer Size: _____
 - Public Sewer: Proposed
 - Private Septic:
 - Est. Cost of Plumbing Work: \$ 55,000** (highlighted in red)
- 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 sign/Contractor sign and seal here: _____
 - Print name here: _____
 - Licensed Contractor Exempt Applicant
- D. TECHNICAL SITE DATA**
 - DESCRIPTION OF WORK**
 - QTY. FUTURE-EQUIPMENT FEE (Office Use Only)
 - Water Closet _____ \$ _____
 - Urinal/Toilet _____ \$ _____
 - Bath Tub _____ \$ _____
 - Lavatory _____ \$ _____
 - Shower _____ \$ _____
 - Floor Drain _____ \$ _____
 - Sink _____ \$ _____
 - Dishwasher _____ \$ _____
 - Drinking Fountain _____ \$ _____
 - Washing Machine _____ \$ _____
 - Heat Pump _____ \$ _____
 - Water Heater _____ \$ _____
 - Fuel Oil Piping _____ \$ _____
 - Gas Piping _____ \$ _____
 - LPG Gas Tank _____ \$ _____
 - Steam Boiler _____ \$ _____
 - Hot Water Boiler _____ \$ _____
 - Sewer Pump _____ \$ _____
 - Interceptor/Separator _____ \$ _____
 - Backflow Preventer _____ \$ _____
 - GreaseTrap _____ \$ _____
 - Sewer Connection _____ \$ _____
 - Water Service Connection _____ \$ _____
 - Sinks _____ \$ _____
 - Other _____ \$ _____
- FOR SUMMARY FORMS USE ONLY**
 - PUBLIC REVIEW**
 - No Plans Required
 - Partial - Underlain Unless Approved
 - Date: _____ Approved by: _____
 - Plumbing Plans Approved
 - Date: _____ Approved by: _____
 - Joint Plan Review Required
 - Bldg. Elec. Fire Elev.
 - SUBCODE APPROVAL FOR PERMIT**
 - Date: _____
 - Approved by: _____
 - SUBCODE APPROVAL FOR CERTIFICATE**
 - CO COD CA
 - Date: _____
 - Approved by: _____
- INSPECTIONS**

Type	Failure	Approval	Initial
Slab	_____	_____	_____
Rough	_____	_____	_____
Water	_____	_____	_____
Sewer	_____	_____	_____
Plumbing	_____	_____	_____
Gas Equipment	_____	_____	_____
Gas Piping	_____	_____	_____
LPG Gas Tank	_____	_____	_____
Fuel Oil Piping	_____	_____	_____
Solar	_____	_____	_____
TOP	_____	_____	_____
Final	_____	_____	_____
- Administrative Surcharge \$ _____**
- Minimum Fee \$ _____**
- State Permit Surcharge Fee \$ _____**
- TOTAL FEE \$ _____**

6. **JOB SUMMARY (Office Use Only):** Skip this section.

8. **TECHNICAL SITE DATA:** Enter a brief **DESCRIPTION OF WORK.**

Enter the **QTY** for the appropriate **FIXTURE/EQUIPMENT.**

The screenshot shows a web browser displaying the 'Internet F130 11-2009 (blue).pmd' form. The form is titled 'PLUMBING SUBCODE TECHNICAL SECTION'. It contains several sections:

- A. IDENTIFICATION—APPLICANT:** Includes fields for Block, Work Site Location, Owner or Firm, Address, Contractor, and Contractor License No.
- B. PLUMBING CHARACTERISTICS:** Includes fields for Use Group, Building Sewer Size, Water Service Size, and Est. Cost of Plumbing Work.
- C. CERTIFICATION IN LIEU OF OATH:** A section for the contractor to certify that they are the agent of, owner of record, and authorized to make the application.
- D. TECHNICAL SITE DATA:** A section with a table for listing fixtures and equipment. The table has columns for 'QTY' and 'FEE (Office Use Only)'. The fixtures listed include Water Closet, Urinal/Fit, Bath Tub, Lavatory, Shower, Floor Drain, Sink, Dishwasher, Drinking Fountain, Washing Machine, Heat Bldg, 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, and Other. A red box highlights this section.
- PLAN REVIEW:** A section for checking if plans are required and approved.
- INSPECTIONS:** A table for recording inspection results for various types of work.
- APPROVALS:** Sections for SUBCODE APPROVAL for PERMIT and SUBCODE APPROVAL for CERTIFICATE, each with fields for Date and Approved by.
- FEE (Office Use Only):** A section for calculating the total fee, including Administrative Surcharge, Minimum Fee, and State Permit Surcharge Fee.

9. **FEE (Office Use Only):** Skip this section.

10. Follow the [Downloading and Printing a Form](#) steps.



KEY: After printing, remember to sign and date all designated areas. Documents submitted without proper signatures and dates will result in a denied permit.

F140: Fire Protection Subcode Technical Section



KEY: Only certain sections and pages of this **Tech Sheet** must be filled out. Read the following steps carefully.

1. After [downloading the Tech Sheet](#), fill out the appropriate grey highlighted areas in the PDF. Click in the grey areas to type.



HINT: Enter all phone numbers and faxes without spaces or punctuation. The form will automatically add the necessary text.

2. You may need to scroll to the side or down to view the entire document.
3. Some of the information will be the same as the **Jacket**, ensure ALL overlapping information is correct on both forms. If the overlapped information does not match, the permit will be denied.

The screenshot shows a web browser displaying the 'F140 02-2011 (red).pmd' form. The form is titled 'FIRE PROTECTION SUBCODE TECHNICAL SECTION' and is divided into several sections:

- A. IDENTIFICATION - APPLICANT:** Includes fields for Block, Lot, Qualification Code, Work Site Location, Owner in Fee, Address, Contractor, and various identification numbers.
- B. FIRE PROTECTION CHARACTERISTICS:** Includes sections for Heating System, Fuel Storage Tank, Fire Alarm System, and Fire Suppression/Standpipe System.
- C. CERTIFICATION IN LIEU OF OATH:** A declaration section where the applicant certifies they are the owner or authorized representative.
- D. TECHNICAL SITE DATA:** Includes a table for 'DESCRIPTION OF WORK' with columns for 'NUMBER' and 'FEE (Office Use Only)'. It lists various systems like Alarm Systems, Fire Pump, Standpipes, and Fire Suppression.
- INSPECTIONS:** A table with columns for 'Type', 'Date (Month/Day)', 'Failure', and 'Approval'.
- APPROVALS:** Sections for 'SUBCODE APPROVAL FOR PERMIT' and 'SUBCODE APPROVAL FOR CERTIFICATE'.
- FEES:** A section at the bottom for 'Administrative Surcharge \$', 'Minimum Fee \$', 'State Permit Surcharge Fee \$', and 'TOTAL FEE \$'.

5. **FIRE PROTECTION CHARACTERISTICS:** Only the **Total Cost of Fire Protection Work** needs to be filled out. This should match the **Est. Cost** for the **Fire Protection** section of the **Jacket**.

A sample form is filled out below.

The screenshot shows a web browser window with the URL `nj.gov/dca/divisions/codes/forms/pdf_ucc_stdforms/ucc_f140_fire_gprot.pdf`. The form is titled "FIRE PROTECTION SUBCODE TECHNICAL SECTION" and is filled out with the following information:

- Identification (A):** Work Site Location: 1 Test St, Sample NJ 12345 Doe Hall, 5555, Room 012. Owner: Rutgers University, 1231 456-7890. Contractor: Genefill Contracting Company A, 123 Sample Road, Sample NJ 12345.
- Certification (C):** Certified Contractor checked.
- Technical Data (D):** Fire Protection Equipment No. 12, Fire Alarm Contractor No. 1234, Home Improvement Contractor Registration No. 55555, Federal Emp. ID No. 55555.
- Fire Protection Characteristics (B):** Fuel Storage Tank: Fuel Type: Flammable or Combustible, Capacity: [blank]. Fire Alarm System: New or Existing: Existing, Location of Panel: [blank]. Fire Suppression/Standpipe System: New or Existing: Existing, Location of Main Control Valve: [blank].
- Costs:** Total Cost of Fire Protection Work: \$0,000.
- Plan Review:** No Plans Required checked.
- Approvals:** Approved by [blank], Date [blank].
- Other Systems:** Various checkboxes for Alarm Systems, Suppression Systems, and Other Systems.
- Administrative Fees:** Minimum Fee \$, State Permit Surcharge Fee \$, TOTAL FEE \$.

6. **JOB SUMMARY (Office Use Only):** Skip this section.

7. **CERTIFICATE IN LIEU OF OATH:** This section must be completed after printing.

Either the Rutgers University Project Manager or the General Contractor must physically sign and print their name.



NOTE: If the General Contractor fills out this section, they must check **Certified Contractor**. If a Rutgers University Project Manager or Rutgers employee fills out this section, they must check **Exempt Applicant**.



CAUTION: Electronic signatures are not accepted. Failure to properly sign and print will result in a denied permit.

The screenshot shows a web browser window displaying a PDF form titled "FIRE PROTECTION SUBCODE TECHNICAL SECTION". The form is filled out with project details for Rutgers University. A red box highlights the "C. CERTIFICATE IN LIEU OF OATH" section, which contains a declaration statement and checkboxes for "Certified Contractor" and "Exempt Applicant". The form also includes a "JOB SUMMARY" table and a "TOTAL FEE" section.

Form Fields:

- Owner of Fee: Rutgers University
- Address: 33 Knightsbridge Road, Piscataway NJ 08854
- Contractor: Genfill Contracting Company A
- Address: 123 Sample Road, Sample NJ 12345
- Fire Protection Equipment, NJ Div of Fire Safety Permit No. 12
- Fire Alarm Contractor No. 1234
- Home Improvement Contractor Registration No. or Exemption Reason
- Federal Emp. ID No. 55555
- Use Group: Present, Proposed
- Const. Class: Present
- Heating System: New or Modification to Existing
- Fire Alarm System: New or Existing
- Fuel Type: Gas, Oil, Electric, Solar
- Fire Suppression/Standpipe System: New or Existing
- Location: [Blank]
- Total Cost of Fire Protection Work: \$ 80,000

Technical Specifications:

- Flammable/Combustible Tanks
- Alarm Systems: System, 110v Interconnected, CO Detectors/110v, Alarm Devices (i.e., smoke, heat, pull, waterflow), Signaling Devices (i.e., horns/bells, bells), Other Devices
- Suppression Systems: Fire Pump, QPM Type, Dry Pipe/Alarm Valves, Pre-action Valves, Sprinkler Heads (Dry and Wet), Standpipes
- Pre-engineered Systems: Wet Chemical, Dry Chemical, CO, Suppression, Foam Suppression, FM200 Suppression, Other
- Other Systems: Kitchen Hood Exhaust System, Smoke Control System, Fuel and Appliance, Gas, Oil, Solid Fuel, Freon/Air Venting/Mini Chimney, Other

Administrative Fees:

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

8. **TECHNICAL SITE DATA:** Leave the **Water Supply Source** and **Method of Alarm/Suppression Supervision** blank. The Office of Codes and Standards will handle this.

Enter the appropriate **NUMBER** for each item.

The screenshot shows a web browser displaying a PDF form titled "FIRE PROTECTION SUBCODE TECHNICAL SECTION". The form is divided into several sections: A. IDENTIFICATION-APPLICANT, B. FIRE PROTECTION CHARACTERISTICS, C. CERTIFICATION IN LIEU OF OATH, and D. TECHNICAL SITE DATA. A red box highlights the "FEE (Office Use Only)" section on the right side of the form, which includes a table for listing items and their associated fees. The table has columns for "NUMBER" and "FEE (Office Use Only)".

NUMBER	FEE (Office Use Only)
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100	

9. **FEE (Office Use Only):** Skip this section.
 10. Follow the [Downloading and Printing a Form](#) steps.



KEY: After printing, remember to sign and date all designated areas. Documents submitted without proper signatures and dates will result in a denied permit.

F145: Mechanical Inspection Technical Section



KEY: Only certain sections and pages of this **Tech Sheet** must be filled out. Read the following steps carefully.

1. After [downloading the Tech Sheet](#), fill out the appropriate grey highlighted areas in the PDF. Click in the grey areas to type.



HINT: Enter all phone numbers and faxes without spaces or punctuation. The form will automatically add the necessary text.

2. You may need to scroll to the side or down to view the entire document.
3. Some of the information will be the same as the **Jacket**, ensure ALL overlapping information is correct on both forms. If the overlapped information does not match, the permit will be denied.

Internet F145 11-2009.pmd

ny.gov/dca/divisions/codes/forms/pdf_ucc_stiforms/ucc_f145_mech_insp.pdf

Internet F145 11-2009.pmd

1 / 1 100%

MECHANICAL INSPECTION TECHNICAL SECTION

Date Received
Control #
Date Issued
Permit #

A. IDENTIFICATION—APPLICANT COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIS NO. 1-800-272-5000.

Block _____ Lot _____ Qualification Code _____
Work Site Location _____
Owner in Fee: _____
Tel. _____ e-mail _____
Address _____
Contractor _____ Tel. _____
Address _____ e-mail _____
Contractor License No. _____ Exp. Date _____
Home Improvement Contractor Registration No. or Exemption Reason _____
Federal Emp. ID No. _____ FAX: _____

B. MECHANICAL CHARACTERISTICS

Use Group Present: R-5
Heating System work: New on Modification to Existing or Conversion or Replacement
Type: Hydraulic Hot Air
Fuel Type: Gas Oil Electric Solar Other _____
Estimated Cost of Mechanical Work \$ _____

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.
Applicant sign/Contractor sign and seal here: _____
Print name here: _____
 Licensed Contractor Exempt Applicant

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

NO. FIXTURE/EQUIPMENT
Water Heater _____
Fuel Oil Piping Connections _____
Gas Piping Connections _____
Steam Boiler _____
Hot Water Boiler _____
Hot Air Furnace _____
Oil Tank _____
LPG Tank _____
Fireplace _____
Generator _____
Other _____

FEE (Office Use Only)
Administrative Surcharge \$ _____
Minimum Fee \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW
 No Plans Required
 Mechanical Plans Approved
Date: _____ Approved by: _____
Joint Plan Review Required: _____
 Bldg Elec Plumb Fire
 Elev
SUBCODE APPROVAL for PERMIT
Date: _____ Approved by: _____
SUBCODE APPROVAL for CERTIFICATE
Date: _____ Approved by: _____

INSPECTIONS
Type: _____ Failure: _____ Approval: _____ Initial: _____
Water Heater _____
Appliance _____
Chimney/vent _____
Piping _____
Tank _____
Cooling/AC _____
Generator _____
Fireplace _____
Chimney Cert. _____
Other _____
Final _____

U.C.C. F145 (Rev. 10/18) Internet version. Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

4. **IDENTIFICATION – APPLICANT:** Enter the appropriate information and ensure that all information that overlaps with the **Jacket** is the same.

Name	Information	Required?
Block	Skip this section.	✗
Lot	Skip this section.	✗
Qualification Code	Skip this section.	✗
Work Site Location	The Building Name, Building Number, Room Number must be included as part of the Address.	✓
Owner in Fee	This will always be Rutgers University. The Rutgers University Project Manager's Email and Phone are placed here. The Address will always be 33 Knightsbridge Road, Piscataway 08854.	✓
Contractor	Enter the General Contractor's Company Name, Phone, Address, Email address, License Number with Expiration Date, and Federal Tax ID.	✓

A sample form is filled out below.

The screenshot shows a web browser window displaying a PDF form titled "MECHANICAL INSPECTION TECHNICAL SECTION". The form is filled out with the following information:

- Block:** (Empty)
- Lot:** (Empty)
- Qualification Code:** (Empty)
- Work Site Location:** 1 Test St, Sample NJ 12345 Doe Hall, 5555, Room 012
- Owner in Fee:** Rutgers University, Tel: (123) 456-7890, e-mail: projectmanager@rutgers.edu, Address: 33 Knightsbridge Road, Piscataway NJ 08854
- Contractor:** General Contracting Company A, Tel: (555) 555-5555, Address: 123 Sample Road, Sample NJ 12345, e-mail: gcontractor@test.com, Contractor License No: 5555555, Exp. Date: 01/28/2025, Federal Emp. ID No: 5555555, FAX: (555) 555-5555
- Use Group:** Present: R-5
- Heating System work:** New or Modification to Existing or Conversion or Replacement
- Type:** Hydronic Hot Air
- Fuel Type:** Gas Oil Electric Solar Other
- Estimated Cost of Mechanical Work:** \$
- JOB SUMMARY (Office Use Only):** Includes a table for PLAN REVIEW, INSPECTIONS, and DATES.
- FIXTURE/EQUIPMENT:** List of items with checkboxes and a corresponding FEE (Office Use Only) column.
- TOTAL FEE:** \$

5. **MECHANICAL CHARACTERISTICS:** Only the **Estimated Cost of Mechanical Work** and the **Present** fields need to be filled out.

Click the box to reveal the **Present** dropdown menu. Select the blank option.

The screenshot shows the 'MECHANICAL INSPECTION TECHNICAL SECTION' form. The 'Use Group' dropdown menu is open, showing 'Present' as the selected option. The 'Estimated Cost of Mechanical Work' field is highlighted with a red box. The form includes sections for identification, certification, technical site data, and mechanical characteristics.

The **Estimated Cost of Mechanical Work** should match the **Est. Cost** for the **Plumbing** section of the **Jacket**.



NOTE: For example, if the **Est. Cost of Plumbing** on the **Jacket** is \$60,000, then the **Estimated Cost of Mechanical Work** can be \$5,000 on the **Mechanical Inspection Technical Section** and the **Estimated Cost of Plumbing Work** can be \$55,000 on the **Plumbing Subcode Technical Section** because this value equals \$60,000.

A sample form is filled out below.

The screenshot shows the 'MECHANICAL INSPECTION TECHNICAL SECTION' form with sample data. The 'Use Group' dropdown is set to 'Present'. The 'Estimated Cost of Mechanical Work' field is filled with '\$ 8,000'. The 'Estimated Cost of Plumbing Work' field is filled with '\$ 55,000'. The form includes sections for identification, certification, technical site data, and mechanical characteristics.

6. **JOB SUMMARY (Office Use Only):** Skip this section.
7. **CERTIFICATE IN LIEU OF OATH:** This section must be completed after printing.

Either the Rutgers University Project Manager or the General Contractor must physically sign and print their name.



NOTE: If the General Contractor fills out this section, they must check **Licensed Contractor**. If a Rutgers University Project Manager or Rutgers employee fills out this section, they must check **Exempt Applicant**.



CAUTION: Electronic signatures are not accepted. Failure to properly sign and print will result in a denied permit.

MECHANICAL INSPECTION TECHNICAL SECTION

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

Block _____ Lot _____ Qualification Code _____
 Work Site Location 1 Test St, Sample NJ 12345 Doe Hall, 5555, Room 012

Owner is Fee: Rutgers University
 Tel: (201) 456-7890 e-mail: projectmanager@rutgers.edu
 Address: 33 Knightsbridge Road Piscataway NJ 08854
 Contractor: General Contracting Company A Tel: (555) 555-5555
 Address: 123 Sample Road e-mail: gcontractor@test.com
 Sample NJ 12345
 Contractor License No: 5555555 Exp. Date: 01/28/2025
 Home Improvement Contractor Registration No. or Exemption Reason
 Federal Corp. ID No: 5555555 FAX: (555) 555-5555

B. MECHANICAL CHARACTERISTICS

Use Group Present New or Modification to Existing or Conversion or Replacement
 Heating System works: New on Modification to Existing or Conversion or Replacement
 Type: Hydronic Hot Air
 Fuel Type: Gas Oil Electric Solar Other _____
 Estimated Cost of Mechanical Work: \$ 8,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	DATES
<input type="checkbox"/> No Plans Required	Type: _____	Failure - Failure - Approval - Initial
<input type="checkbox"/> Mechanical Plans Approved	Water Heater	
Date: _____ Approved by: _____	Appliance	
Joint Plan Review Required: <input type="checkbox"/>	Chimney/Vent	
<input type="checkbox"/> Bldg. <input type="checkbox"/> Elec. <input type="checkbox"/> Plumb. <input type="checkbox"/> Fire.	Piping	
<input type="checkbox"/> Elec.	Tank	
SUBCODE APPROVAL FOR PERMIT	Cooling/AC	
Date: _____	Generator	
Approved by: _____	Fireplace	
	Chimney Cap	
	Other	
	Final	

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.
 Applicant sign/Contractor sign and seal here:
 Print name here: David Doe
 Licensed Contractor Exempt Applicant

DESCRIPTION OF WORK

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Heater	\$ _____
	Fuel Oil Piping Connections	\$ _____
	Gas Piping Connections	\$ _____
	Steam Boiler	\$ _____
	Hot Water Boiler	\$ _____
	Hot Air Furnace	\$ _____
	Oil Tank	\$ _____
	LPG Tank	\$ _____
	Fireplace	\$ _____
	Generator	\$ _____
	Other	\$ _____
	Administrative Surcharge	\$ _____
	Minimum Fee	\$ _____
	State Permit Surcharge Fee	\$ _____
	TOTAL FEE	\$ _____

S.C.C. F-145 (rev. 12/16) Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

8. TECHNICAL SITE DATA: Enter a brief DESCRIPTION OF WORK.

Enter the appropriate **NO.** for each **FIXTURE/EQUIPMENT**.

MECHANICAL INSPECTION TECHNICAL SECTION

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION, WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY OIG NO. 1-800-272-1900

Block: _____ Lot: _____ Qualification Code: _____
Work Site Location: 1 Test St, Sample NJ 12345 Doe Hall, 5555, Room 012

Owner in Fee: Rutgers University
Tel: (201) 455-7800 e-mail: projectmanager@rutgers.edu
Address: 33 Knightsbridge Road, Piscataway NJ 08854
Contractor: General Contracting Company A, Tel: (555) 555-5555
Address: 123 Sample Road, Sample NJ 12345, e-mail: gconractor@test.com
Contractor License No.: 5555555 Exp. Date: 01/28/2025
Home Improvement Contractor Registration No. or Exemption Reason: _____
Federal Emp. ID No.: 5555555 FAX: (555) 555-5555

B. MECHANICAL CHARACTERISTICS
Use Group: Present: New or Modification to Existing or Conversion or Replacement
Heating System work: New or Modification to Existing or Conversion or Replacement
Type: Hydronic Hot Air
Fuel Type: Gas Oil Electric Solar Other _____
Estimated Cost of Mechanical Work: \$ 8,000

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.
Applicant sign/Contractor sign and seal here: _____
Print name here: David Doe

TECHNICAL SITE DATA
DESCRIPTION OF WORK
Brief description of work: _____

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
	Water Heater	\$
	Fuel Oil Piping Connections	\$
	Gas Piping Connections	\$
	Steam Boiler	\$
	Hot Water Boiler	\$
	Hot Air Furnace	\$
	Oil Tank	\$
	LPG Tank	\$
	Fireplace	\$
	Generator	\$
	Other	\$

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

JOB SUMMARY (Office Use Only)
PLAN REVIEW
 No Plans Required
 Mechanical Plans Approved
Date: _____ Approved by: _____
Joint Plan Review Required: _____
 Bldg. Elec. Plumb. Fire. Elev.
PERMITS APPROVAL FOR PERMIT
Date: _____
APPROVAL FOR CERTIFICATE
 CA COO
Date: _____
Approved by: _____

INSPECTIONS
Type: _____ Failure: _____ Approval: _____ Initial: _____
Water Heater
Appliance
Chimney/Vent
Piping
Tank
Cooling/AC
Generator
Fireplace
Chimney Capt.
Other

DATES
Failure: _____ Approval: _____ Initial: _____

U.C.C. 1748 (Rev. 12/16) Applicant: After submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

9. FEE (Office Use Only): Skip this section.

10. Follow the [Downloading and Printing a Form](#) steps.



KEY: After printing, remember to sign and date in all designated areas.

Documents submitted without proper signatures and dates will result in a denied permit.

F150: Elevator Subcode Technical Section



KEY: Only certain sections and pages of this **Tech Sheet** must be filled out. Read the following steps carefully.

1. After [downloading the Tech Sheet](#), fill out the appropriate grey highlighted areas in the PDF. Click in the grey areas to type.



HINT: Enter all phone numbers and faxes without spaces or punctuation. The form will automatically add the necessary text.

2. You may need to scroll to the side or down to view the entire document.
3. Some of the information will be the same as the **Jacket**, ensure ALL overlapping information is correct on both forms. If the overlapped information does not match, the permit will be denied.

ELEVATOR SUBCODE TECHNICAL SECTION

A. IDENTIFICATION—APPLICANT COMPLETE ALL APPLICABLE INFORMATION WHEN CHANGING CONTRACTORS. NOTIFY THIS OFFICE, CALL UTILITY DIS NO. 1-800-220-1000.

Block _____ Lot _____ Qualification Code _____
Work Site Location _____
Owner in Fee _____
Tel. _____ e-mail _____
Address _____
Contractor/Installer _____ Tel. _____
Address _____ e-mail _____
Home Improvement Contractor Registration No. or Exemption Reason _____
Federal Emp. ID No. _____ FAX _____
Maintenance/Service Contractor _____
Address _____
Tel. _____ FAX _____

B. ELEVATOR CHARACTERISTICS

Building User Group _____ Building Registration No. _____
Manufacturer _____ Division I.D. _____
Machine Room Location _____
No. of Stops _____ No. of Openings _____
Travel (ft) _____ Speed (f.m.) _____
Type of Control _____ Type of Operation _____
Passenger _____ Freight _____
Capacity (lbs) _____ Year of Installation _____

Estimated Cost of Elevator Work \$ _____

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.
Sign here _____
Print name here _____
Date Received Control # _____
Date Issued Permit # _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK _____

QTY.	ITEM	FEE (Office Use Only)
_____	Traction or Winding Drum	_____
_____	1 to 10 Floors	_____
_____	Over 10 Floors	_____
_____	Hydraulic	_____
_____	Rigid Hydraulic	_____
_____	Escalator/Moving Walk	_____
_____	Dumbwaiter	_____
_____	Railway Carlift, Inclined and Vertical Wheelchair Lifts and Man Lifts	_____
_____	Oil Buffers	_____
_____	Counterweight Governor and Substitutes	_____
_____	Auxiliary Power Generator	_____
_____	Alterations	_____
_____	Other	_____

Administrative Surcharge \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Dates (Month/Day)				
<input type="checkbox"/> No Plans Required	Type	Type	Failure	Failure	Approval	Initial
<input type="checkbox"/> Building Plans and Elevator Specs.	_____	_____	_____	_____	_____	_____
Date _____ Approved by _____	_____	_____	_____	_____	_____	_____
<input type="checkbox"/> Elevator Layout Drawings	_____	_____	_____	_____	_____	_____
Date _____ Approved by _____	_____	_____	_____	_____	_____	_____
<input type="checkbox"/> Joint Plan Review Required	_____	_____	_____	_____	_____	_____
Date _____ Approved by _____	_____	_____	_____	_____	_____	_____
<input type="checkbox"/> SUBCODE APPROVAL FOR PERMIT	_____	_____	_____	_____	_____	_____
Date _____ Approved by _____	_____	_____	_____	_____	_____	_____

U.C.C. F150 (rev. 10/05) Applicant When Submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.

4. **IDENTIFICATION – APPLICANT:** Enter the appropriate information and ensure that all information that overlaps with the **Jacket** is the same.

Name	Information	Required?
Block	Skip this section.	✗
Lot	Skip this section.	✗
Qualification Code	Skip this section.	✗
Work Site Location	The Building Name, Building Number, Room Number must be included as part of the Address.	✓
Owner in Fee	This will always be Rutgers University. The Rutgers University Project Manager's Email and Phone are placed here. The Address will always be 33 Knightsbridge Road, Piscataway 08854.	✓
Contractor	Enter the General Contractor's Company Name, Phone, Address, Email address, License Number with Expiration Date, and Federal Tax ID.	✓

A sample form is filled out below.

The screenshot shows a web browser window with the URL nj.gov/dca/divisions/codes/forms/pdf_ucc_stdforms/ucc_f150_elev.pdf. The form is titled "ELEVATOR SUBCODE TECHNICAL SECTION" and is filled out with the following information:

- IDENTIFICATION—APPLICANT:**
 - Block: _____ Lot: _____ Qualification Code: _____
 - Work Site Location: 1 Test St, Sample NJ 12345, Doe Hall, 5555, Room 012
 - Owner in Fee: Rutgers University
 - No: _____ Tel: (23) 456-7890 e-mail: projectmanager@rutgers.edu
 - Address: 33 Knightsbridge Road, Piscataway NJ 08854
 - Contractor/Install: General Contracting Company A
 - No: (555) 555-5555
 - Address: 123 Sample Road, Sample NJ 12345
 - e-mail: gcontractor@test.com
 - Home Improvement Contractor Registration No. or Exemption Reason: _____
 - Home Improvement Contractor Registration No.: 550555 e-mail: (555) 555-5555
- TECHNICAL SITE DATA:**
 - DESCRIPTION OF WORK: _____
 - QTY: _____ ITEM: _____
 - ITEMS: Traction or Winding Drum (1 to 10 Floors), Over 10 Floors, Hydraulic, Rigid Hydraulic, Escalator/Moving Walk, Dumbwaiter, Stairway Chassis, Inclined and Vertical Wheelchair Lifts and Man Lifts, OR Buffers, Counterweight Governor and Stables, Auxiliary Power Generator, Alterations, Other.
 - FEE (Office Use Only):
 - Administrative Surcharge \$ _____
 - State Permit Surcharge Fee \$ _____
 - TOTAL FEE \$ _____
- JOBSUMMARY (Office Use Only):**
 - PLAN REVIEW:
 - No Plans Required
 - Building Plans and Elevator Specs
 - Elevator Layout Drawings
 - INSPECTIONS:

Type	Temp	Final	Approval	Initial
_____	_____	_____	_____	_____
 - DATE: _____
 - APPROVED BY: _____
 - DATE: _____
 - APPROVED BY: _____

5. **ELEVATOR CHARACTERISTICS:** Only the **Estimated Cost of Elevator Work** needs to be filled out. This should match the **Est. Cost** for the **Elevator** section of the **Jacket**.

A sample form is filled out below.

The screenshot shows a web browser window with the URL `nj.gov/dca/divisions/codes/forms/pdf_ucc_stdforms/ucc_f150_slev.pdf`. The form is titled "ELEVATOR SUBCODE TECHNICAL SECTION" and is filled out with sample data. Key sections include:

- A. IDENTIFICATION—APPLICANT COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THE OFFICE. CALL UTILITY DIS NO: 1-800-272-1000**
 - Block: _____ Lot: _____ Qualification Code: _____
 - Work Site Location: 1 Test St, Sample NJ 12345, Doe Hall, 5555, Room 012
 - Owner: Rutgers University
 - Contractor: General Contracting Company A
 - Home Improvement Contractor Registration No. or Exemption Reason: _____
 - Federal Emp. ID No.: 555555
- B. ELEVATOR CHARACTERISTICS**
 - Building Use Group: _____ Building Registration No.: _____
 - Manufacturer: _____ Device I.D.: _____
 - Machine Room Location: _____
 - No. of Stops: _____ No. of Openings: _____
 - Travel (ft.): _____ Speed (ft./min.): _____
 - Type of Control: _____ Type of Operation: _____
 - Passenger: _____ Freight: _____
 - Capacity (lbs): _____
 - Estimated Cost of Elevator Work \$ 25,000** (highlighted in red)
- 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: _____
 - Print name here: _____
- D. TECHNICAL SITE DATA**
 - DESCRIPTION OF WORK: _____
 - QTY: ITEM (Traction or Winding Drum, 1 to 10 Floors, Over 10 Floors, Hydraulic, Roped Hydraulic, Escalator/Moving Walk, Dumbwaiter, Stairway Chairlift, Inclined and Vertical Wheelchair Lifts and Man Lifts, Oil Buffers, Counterweight Governor and Balloons, Auxiliary Power Generator, Alternators, Other)
 - FEE (Office Use Only) table with columns for Administrative Surcharge, State Permit Surcharge, and TOTAL FEE.
- PLAN REVIEW**
 - 1 | No Plans Required
 - 1 | Building Plans and Elevator Specs.
 - 1 | Elevator Layout Drawings
 - 1 | Subcode Approval for Permit
- INSPECTIONS**

Item	Type	Failure	Failure	Approval	Initial
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
- SUBCODE APPROVAL FOR CERTIFICATE**
 - 1 | Subcode Approval for Certificate
 - 1 | Subcode Approval for Permit

6. **JOB SUMMARY (Office Use Only):** Skip this section.

7. **CERTIFICATE IN LIEU OF OATH:** This section must be completed after printing.

Either the Rutgers University Project Manager or the General Contractor must physically sign and print their name.



CAUTION: Electronic signatures are not accepted. Failure to properly sign and print will result in a denied permit.

ELEVATOR SUBCODE TECHNICAL SECTION

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

Block: _____ Lot: _____ Qualification Code: _____
 Work Site Location: 1 Test St, Sample NJ 12345, Doe Hall, 5555, Room 012

Owner: Rutgers University
 Tel: (123) 456-7890 e-mail: projectmanager@rutgers.edu
 Address: 33 Knightbridge Road Princeton NJ 08542

Contractor: General Contracting Company A
 Tel: (555) 555-5555 e-mail: gcontractor@test.com
 Address: 123 Sample Road Sample NJ 12345

Home Improvement Contractor Registration No. or Exemption Reason: _____
 Federal Emp. ID No. 555555 FAX (555) 555-5555

Maintenance/Service Contractor
 Address: _____ e-mail: _____
 Tel: _____ FAX: _____

B. ELEVATOR CHARACTERISTICS

Building Use Group: _____ Building Registration No.: _____
 Manufacturer: _____ Device I.D.: _____
 Machine Room Location: _____
 No. of Stops: _____ No. of Openings: _____
 Travel (ft.): _____ Speed (f.p.m.): _____
 Type of Control: _____ Type of Operation: _____
 Passenger: _____ Freight: _____
 Capacity (lba.): _____
 Year of Installation: _____ Year of Alteration: _____
 Estimated Cost of Elevator Work: \$ 25,000

JOB SUMMARY (Office Use Only)

PLAN REVIEW
 1) No Plans Required
 Building Plans and Elevator Specs.
 Date: _____ Approved by: _____
 Elevator Layout Drawings
 Date: _____ Approved by: _____
 1) Mech. 1) Elec. 1) Plumb. 1) Fin.
 Date: _____

INSPECTIONS

Type	Pass	Fail	Approval	Date
Temporary				
Final				

SUBCODE APPROVAL FOR CERTIFICATE
 Date: _____ I: SO: 1 | CA:
 Approved by: _____

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.
 Sign here: _____
 Print name here: David Doe

DESCRIPTION OF WORK:
 QTY: ITEM FEE (Office Use Only)
 Traction or Winding Drum
 1 to 10 Floors \$ _____
 Over 10 Floors \$ _____
 Hydraulic \$ _____
 Roped Hydraulic Escalator/Moving Walk \$ _____
 Dumbwaiter \$ _____
 Stairway Chairlift, Inclined and Vertical Wheelchair Lifts and Man Lifts \$ _____
 Oil Buffers \$ _____
 Counterweight Governor and Safeties \$ _____
 Auxiliary Power Generator \$ _____
 Alternative \$ _____
 Other \$ _____
 Administrative Surcharge \$ _____
 State Permit Surcharge Fee \$ _____
 TOTAL FEE \$ _____

U.C.C. F150 (Rev. 10/05)
 Homeowner: _____ Applicant: _____
 Enforcement Office: please provide one original plus three photocopies.

8. TECHNICAL SITE DATA: Enter a brief DESCRIPTION OF WORK.

Enter the appropriate **QTY** for each **ITEM**.

ELEVATOR SUBCODE TECHNICAL SECTION

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

Block _____ Lot _____ Qualification Code _____
Work Site Location 1 Test St, Sample NJ 12345, Doe Hall, 5555, Room 012
Owner or Fee Rutgers University
Tel (123) 456-7890 e-mail projectmanager@rutgers.edu
Address 33 Knightbridge Road Princeton NJ 08542
Contractor General Contracting Company A Tel (555) 555-5555
Address 123 Sample Road e-mail gcontractor@test.com
Sample NJ 12345
Home Improvement Contractor Registration No. or Exemption Reason _____
Federal Emp. ID No. 555555 FAX (555) 555-5555
Maintenance/Service Contractor _____
Address _____
Tel _____ FAX _____

B. ELEVATOR CHARACTERISTICS

Building Use Group _____ Building Registration No. _____
Manufacturer _____ Device I.D. _____
Machine Room Location _____
No. of Stops _____ No. of Openings _____
Travel (ft.) _____ Speed (ft./min.) _____
Type of Control _____ Type of Operation _____
Passenger _____ Freight _____
Capacity (lbs.) _____
Year of Installation _____ Year of Alteration _____
Estimated Cost of Elevator Work \$ 25,000

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.
Sign here: _____
Print name here: David Doe

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK
Brief description of work _____

QTY	ITEM	FEE (Office Use Only)
	Traction or Winding Drum	
	1 to 10 Floors	
	Over 10 Floors	
	Hydraulic	
	Roped Hydraulic	
	Escalator/Moving Walk	
	Dumbwaiter	
	Stairway Chairlift, Inclined and Vertical Wheelchair Lifts and Man Lifts	
	Counterweight Governor and Buffets	
	Auxiliary Power Generator	
	Alternate	
	Other	

Administrative Surcharge \$ _____
State Permit Surcharge Fee \$ _____
TOTAL FEE \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW

1	2	3	4	5	6
No. Plans Reviewed	Approved by	Date	Approved by	Date	Approved by

INSPECTIONS

Type	Dates (Month/Day)	Pass	Fail	Approval	Total
Final					

SUBCODE APPROVAL FOR CERTIFICATE

1	2	3	4	5	6
1	2	3	4	5	6

UCC F150 (rev. 11/05) Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original and two photocopies.

9. FEE (Office Use Only): Skip this section.

10. Follow the [Downloading and Printing a Form](#) steps.

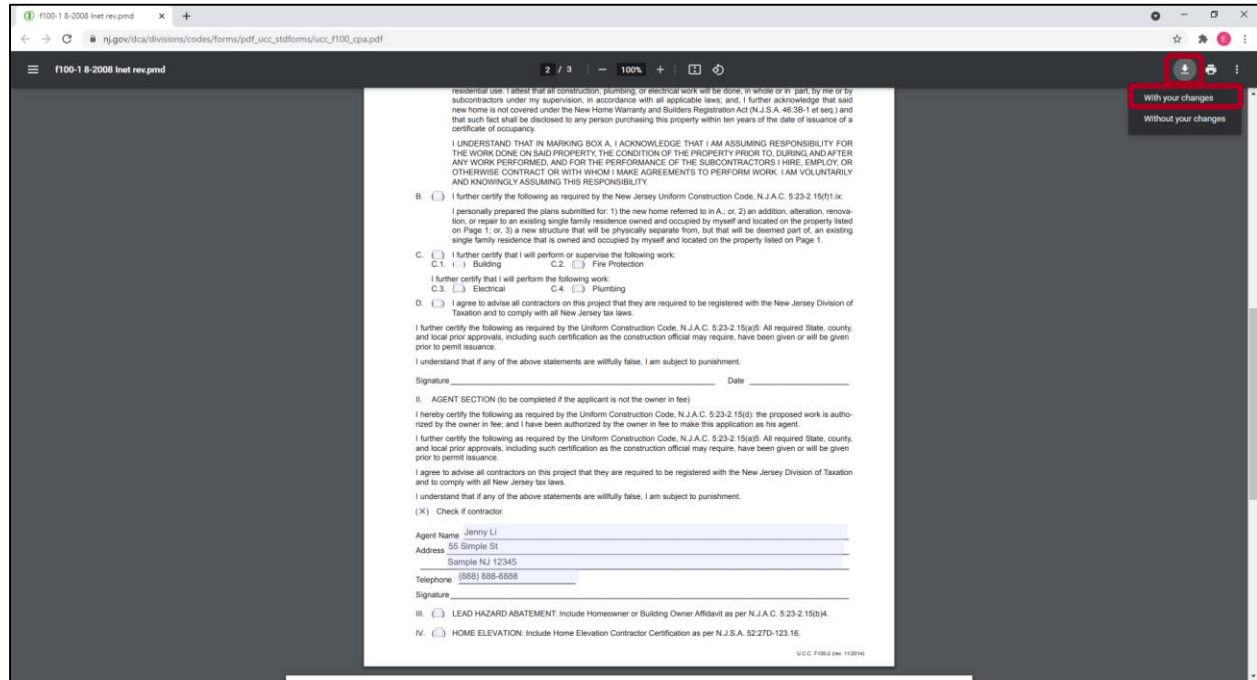


KEY: After printing, remember to sign and date in all designated areas.

Documents submitted without proper signatures and dates will result in a denied permit.

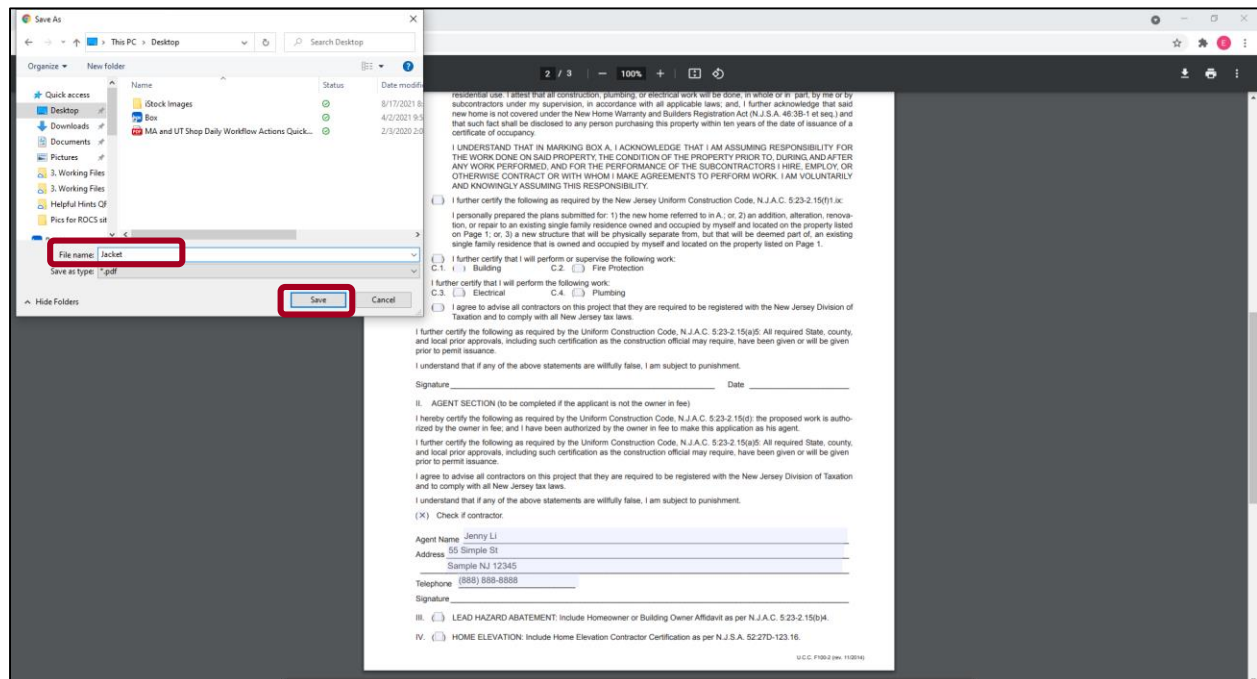
Downloading and Printing a Form


1. Click the **Download** icon  and select **with your changes** to save the document.

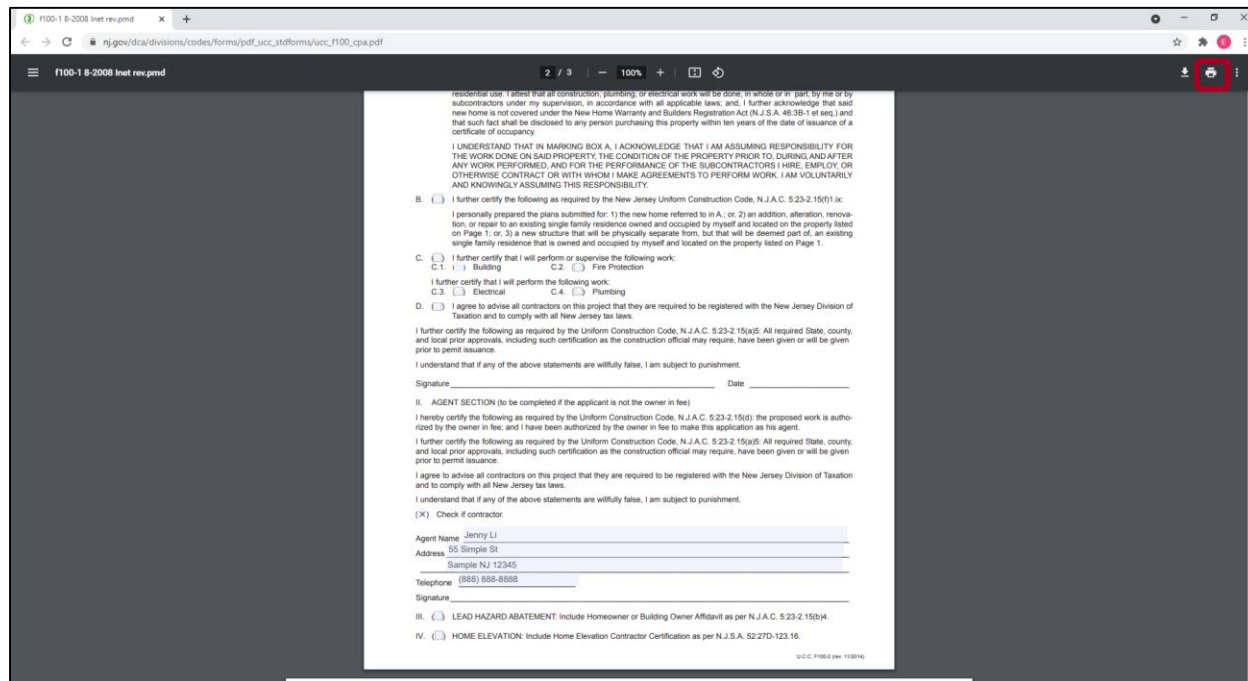


2. Select a location to save the file.

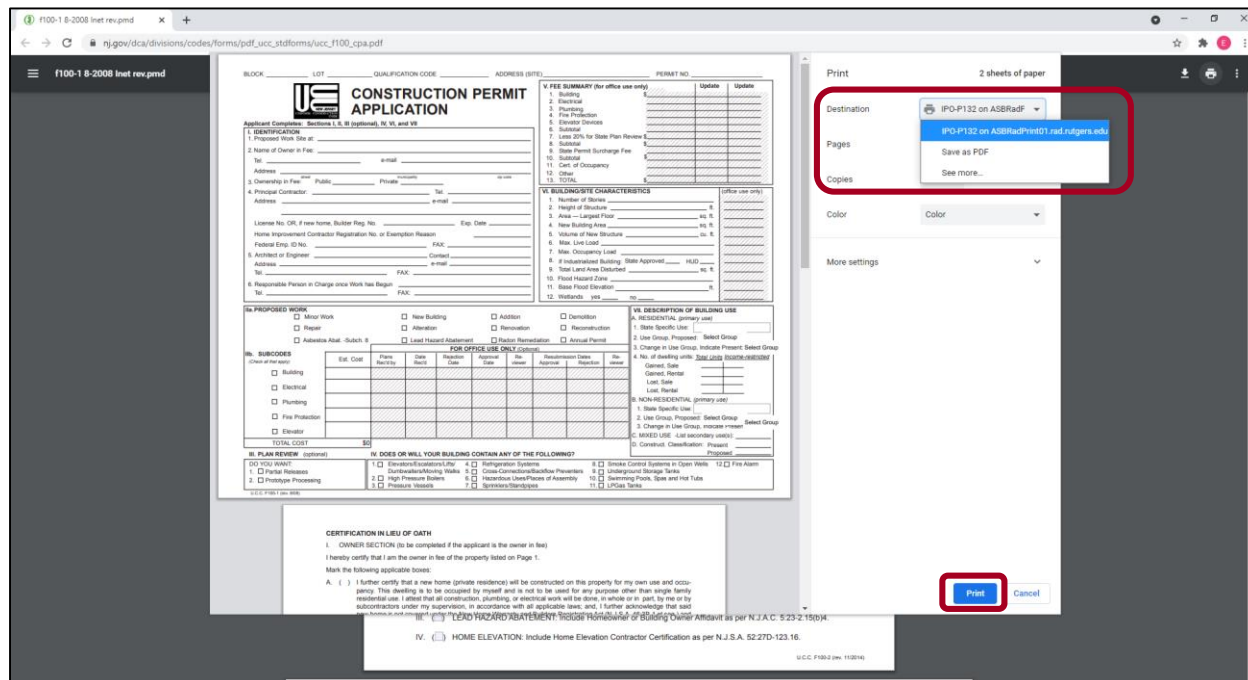
Enter a name for the file and click **Save**.



3. After saving the file, click the **Print** icon . Alternatively, go to the file save location and print from there.



4. A pop-up tab will appear. Select the appropriate **Destination**. Click **Print**.



5. Sign and date the form in the appropriate areas.

Submitting the Permit Packet for Review



KEY: Each project must have its own **Permit Packet**. Each location receives its own permit. If the Contractor is doing work in several rooms on the same floor, those may be grouped together.

The **Permit Packet** consists of the following items:

- A completed **Jacket**
- Completed **Tech Sheets**
- 2 copies of **signed and sealed Drawings**, both signed by a Rutgers University Architect

Every form in the Permit Packet must include the following information:

- Building number
- Building name
- Building address
- Room number (if applicable)
- Rutgers University Project Manager name, phone number, and email



CAUTION: Failure to provide any of the above materials will automatically result in a denied permit.

1. Print all **Permit Packet** materials.
2. Sign and date in all the designated areas. Electronic signatures are not acceptable.
3. Fees are not charged to Rutgers University operated building or department.



NOTE: The only instance where fees are charged involves for-profit tenant renting space from the university. In this case, pay the Permit Fee and Permit Review Fee with a check made out to The Office of Codes and Standards - Rutgers University.

4. Submit the physical **Permit Packet** for review by mail or in-person to:

William (Bill) Fox
33 Knightsbridge Road, 3rd Floor West Wing
Piscataway, NJ 08854



KEY: If there is additional work planned for later, and the **Tech Sheets** are not ready, you must notify the Office of Codes and Standards upon submittal.



NOTE: Only **Tech Sheets** and updated **Drawings** (with Rutgers University Architect signature) need to be submitted for additional work on an open permit. Notify the Office of Codes and Standards that this work is part of an existing permit and provide the **Permit Number**.

5. Once the permit is received, the **Drawings** are reviewed by a **Sub Code Official**.

If approved, a **Permit Number** is issued and work can begin. The Rutgers University Project Manager will be given a copy of the **Permit Packet**, including the **Drawings**, all physically signed by a Code Official from the Office of Codes and Standards.

If any section of the **Permit Packet** is denied, the packet will be returned to the Rutgers University Project Manager, who is responsible for resubmission.



STOP: Never begin without an approved permit. Follow this User Guide to request a permit before starting any project.

6. After the permit is approved and work starts, inspections can begin.

Scheduling an Inspection

For **Final Fire Inspection**:

- All other final inspections must be completed prior to the **Final Fire Inspection**. This is always the last inspection since construction dust can interfere with tests.
- All pre-tests and reports must be completed and submitted. This includes the 200 psi/2-hour test on the water service line.
- All of the following people must be present at inspection:
 - The Electrical Contractor
 - A representative from the fire alarm company
 - A representative from the sprinkler company (if applicable)
 - Rutgers University Project Manager



NOTE: The Rutgers University Project Manager schedules the appointment with the fire alarm company.

For all inspections (including **Final Fire Inspection**):



KEY: The **Inspection Request Form** can be filled out by either the Contractor or the Rutgers University Project Manager. However, it is the Rutgers University Project Manager's responsibility to reschedule any inspections.

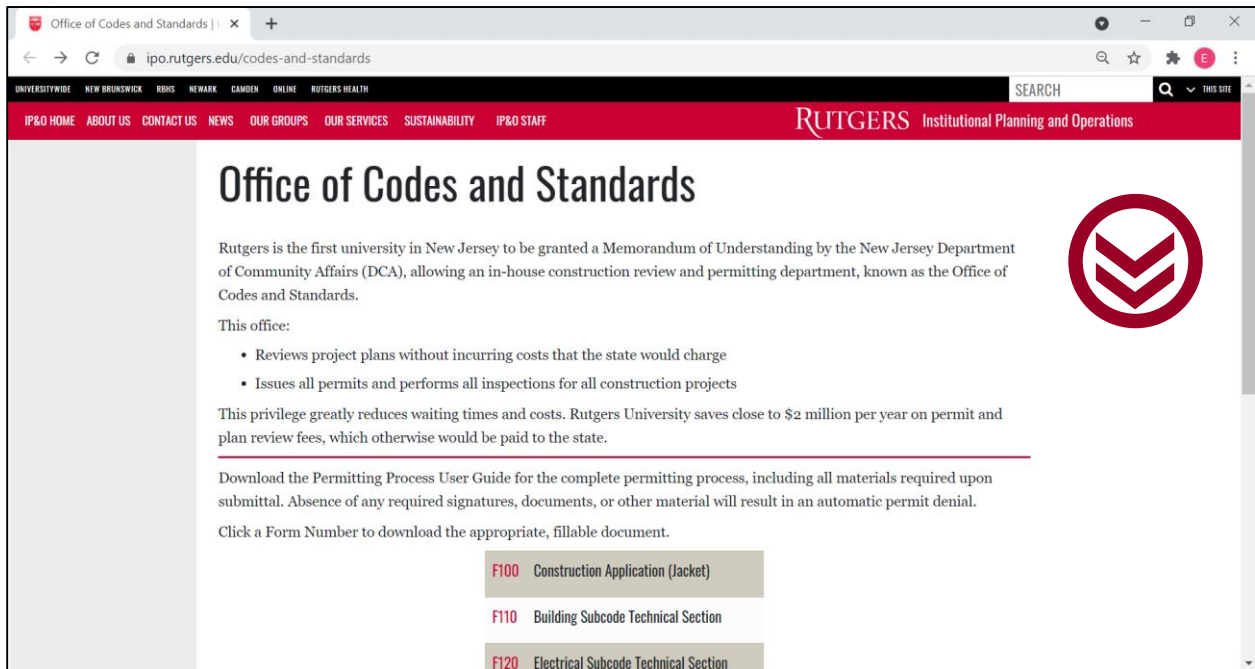


CAUTION: All work must be complete prior to scheduling an inspection. If work is not complete, [contact](#)⁷ the Office of Codes and Standards immediately.

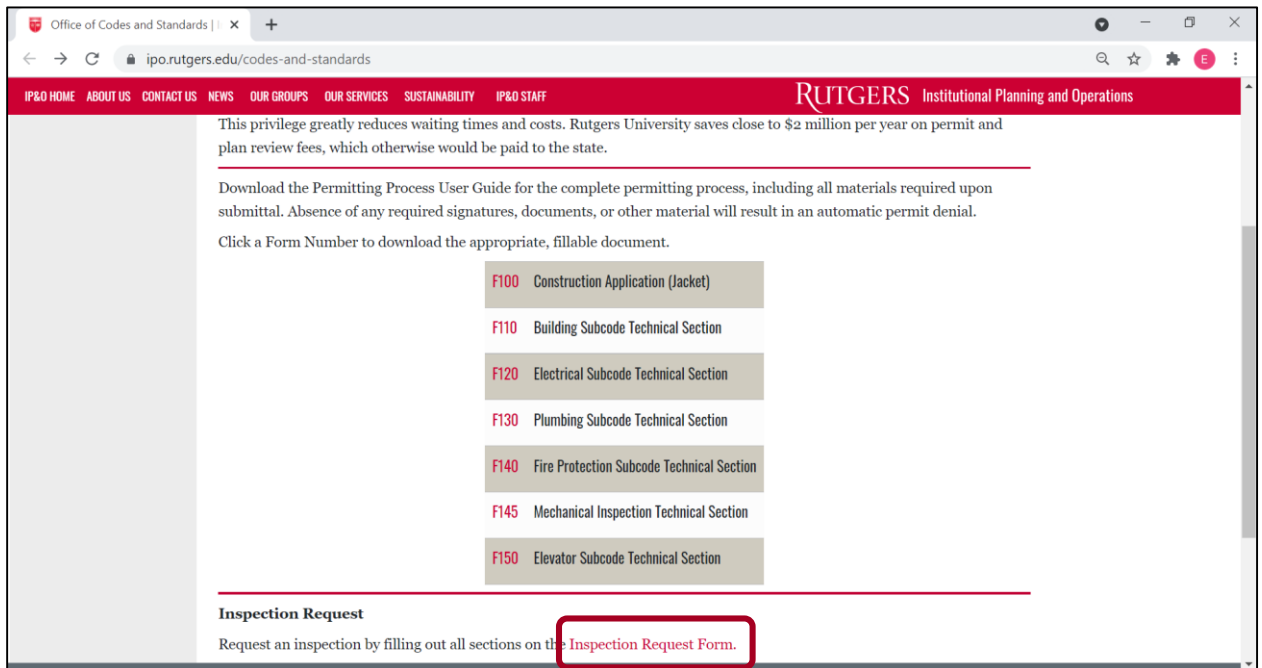
⁷ william.fox@rutgers.edu

To schedule any inspection:

1. Navigate to the [Office of Codes and Standards](https://ipo.rutgers.edu/codes-and-standards)⁸ website.



2. Click **Inspection Request Form**.



⁸ <https://ipo.rutgers.edu/codes-and-standards>

3. Enter the appropriate information and click **Submit**.

The screenshot shows a web browser window with the URL ipo.rutgers.edu/inspection-request-form. The page title is "Inspection Request Form". Below the title, there is a note: "All pertinent work must be completed before the inspection. Additionally" followed by two bullet points: "The Project Manager or Contractor must be present at the inspection." and "The Project Manager must **contact** the Office of Codes and Standards if rescheduling is necessary." The form fields are: "First Name: *", "Last Name: *", "Email: *", "Phone Number: *", "Contractor or Project Manager?*" (with radio buttons for "Contractor" and "Project Manager"), "Permit Number: *", and "Room Number (if applicable):". A red box highlights the "SUBMIT" button at the bottom left of the form. The footer contains contact information for general and group specific inquiries, and social media icons for Facebook, Instagram, and Twitter.

4. A member of the Office of Codes and Standards will review your request and schedule an inspection.



STOP: Either the Rutgers University Project Manager or the Contractor must be present at the inspection.

5. If work passes inspection, work can continue. If this is the final inspection, continue to Step 6.

If work does not pass inspection, the Office of Codes and Standards records the inspection as “Did not pass.”



STOP: New work cannot begin until this work is corrected. Once the work is corrected, the Rutgers University Project Manager must [contact](#) the Office of Codes and Standards for re-inspection.

6. If work passes inspection and this is the final inspection, a **Certificate of Occupancy (CO)** or **Certificate of Approval (CA)** is given.

An example **CO** and **CA** are located on the following pages.

If a **Temporary Certificate of Occupancy (TCO)** is given, view the attached comments and **Valid** date. The Rutgers University Project Manager and Contractor have until that date to correct all comments.



STOP: Read the **TCO** carefully. The **TCO** may only offer temporary approval for certain areas within a building, not the entire building.



CAUTION: All conditions must be met before the **Valid** date. Failure to meet all conditions may result in an immediate order to vacate.

An example **TCO** is located on the following pages.

Certificate

Construction Code Division
(Certificate of Occupancy)

Identification

Date Issued _____
Control Number _____
Permit Number _____
Permit Issue Date _____
Certificate Number _____

Work Site Location: _____ Block: _____ Lot: _____ Qual: _____
Owner in Fee: _____
Owner Address: _____
Telephone: _____
Contractor _____
Address _____
Telephone: _____ Fax: _____ Federal Emp. Number: _____
License Number or Builders Registration Number: _____
Home Warranty Number: _____ Type of Warranty Plan: State Private
Use Group: _____ Construction Classification: _____
Maximum Live Load: 0 _____ Maximum Occupancy Load: 0 _____
Description of Work/Use: _____

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 NJACS: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 _____

Date Printed: 9/1/2021

U.C.C. F260 (rev. 08/05)

Fee: _____

Check Number: _____

Collected By: _____

Page 1

Certificate

Construction Code Division

(Certificate of Approval)

Identification

Date Issued _____
Control Number _____
Permit Number _____
Permit Issue Date _____
Certificate Number _____

Work Site Location: _____ Block: _____ Lot: _____ Qual: _____
Owner in Fee: _____
Owner Address: _____
Telephone: _____
Contractor
Address _____
Telephone: _____ Fax: _____ Federal Emp. Number: _____
License Number or Builders Registration Number: _____
Home Warranty Number: _____ Type of Warranty Plan: State Private
Use Group: _____ Construction Classification: _____
Maximum Live Load: _____ Maximum Occupancy Load: _____
Description of Work/Use: _____

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:

Fee: _____
Check Number: _____
Collected By: _____

Construction Official
Date Printed: 9/1/2021

U.C.C. F260 (rev. 08/05)

Page 1

Certificate

Construction Code Division

(Temporary Certificate of Occupancy)

Identification

Date Issued _____
Control Number _____
Permit Number _____
Permit Issue Date _____
Certificate Number _____

Work Site Location: _____ Block: _____ Lot: _____ Qual: _____
Owner in Fee: _____
Owner Address: _____
Telephone: _____
Contractor _____
Address _____
Telephone: _____ Fax: _____ Federal Emp. Number: _____
License Number or Builders Registration Number: _____

Home Warranty Number: _____ Type of Warranty Plan: State Private

Use Group: _____ Construction Classification: _____

Maximum Live Load: _____ Maximum Occupancy Load: _____

Description of Work/Use:

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 NJACS: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:

Fee: _____

Check Number: _____

Collected By: _____

Construction Official _____

Date Printed: 9/1/2021

U.C.C. F260 (rev. 08/05)

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