

**(201) 391-5732** Fax: (201) 391-1312

#### **BOROUGH OF MONTVALE**

Building Department - Code Enforcement
12 DePiero Drive, Montvale, NJ 07645

www.montvale.org

## INFORMATION REQUIRED FOR ALL GENERATOR APPLICATIONS

1. A survey is required showing the location and setbacks of the generator

### ELECTRIC INFORMATION REQUIRED FOR ALL GENERATORS

- 1. The specifications of the generator and transfer switch must be provided
- 2. Show location of electric panel and transfer switch
- 3. A line diagram to show wire size, conduit size, length for feeder and control wires
- 4. Residential load calculations

### PLUMBING INFORMATION REQUIRED FOR ALL GENERATORS

- 1. Gas line shall run from generator, without other take offs, directly to a 1.25" minimum tee at the gas meter.
- 2. The pipe diameter shall be taken from the I.F.G.C. 2009 table 402.4(1) (if metallic) which can accommodate the full load capacity of the generator.
- 3. Provide a diagram of this gas line showing the materials to be used, lengths and size for each section.
- 4. Other piping arrangements are permitted with sizing calculations submitted for the entire gas service system (old and new) by "Longest Length Method" or other approved method.
- 5. The meter and / or gas service may have to be upgraded per the gas utility provider requirements.
- \*\*\*A permit will not be issued until the above information is received and approved.

## SIGN REQUIREMENTS FOR ALL GENERATORS

A permanently engraved sign that says "2<sup>nd</sup> Power Source Available / Generator" must be obtained for all generator installations. The sign should be red with white lettering - lettering should be <sup>3</sup>/<sub>4</sub>" high (minimum) and mounted on the house next to the meter.

\*\*\*The final electrical inspection will not be approved without the above sign properly installed.

\*\*\*The electrical contractor <u>must</u> be present for the final inspection.



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## **CORRUGATED STAINLESS STEEL TUBING (CSST)**

When installing CSST piping, an ELECTRICAL SUB CODE must be submitted for Bonding.

| Block                           | Lot | Permit #            |
|---------------------------------|-----|---------------------|
| Work Site Address               |     |                     |
|                                 |     |                     |
| Contractor                      |     |                     |
| I will be using CSST            |     | Name Signature Date |
| I will <u>not</u> be using CSST |     | NameSignatureDate_  |



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## **ZONING PERMIT APPLICATION**

|                                    | Per  | mit #                             |            |
|------------------------------------|--|-----------------------------------|------------|
| Block                              | Lot  | Zone                              |            |
|                                    |  |                                   |            |
| Property Address                   |  |                                   |            |
| Owner of Property                  |  |                                   |            |
| Address                            |  |                                   |            |
| Home telephone                     | Daytime telephone                            | Cell telephone                    |            |
| Name of Contractor or Pe           | erson responsible for work, if other than ab | oove                              |            |
| Address                            |  |                                   |            |
| Contact telephone numbe            | r  | License #                         |            |
| AUTHORIZATION: A AUTHORIZATION MUS |  | ER IS MAKING THIS APPLICATION; TH | E FOLLOWIN |
| TO THE ZONING OFFIC                | CIAL OF THE BOROUGH OF MONTV                 | ALE:                              |            |
| Is hereby authorized to ac         | Name of De ton behalf of this application    | signee                            |            |
| Date                               | Sign   | ature of Owner / Applicant        |            |

# **ZONING PERMIT REQUEST**

PLEASE CHECK ALL THAT APPLY: A current survey showing proposed locations and setbacks are required for all permit applications

| Accessory Structure (100 sq. ft. or less) (Plans required)                               | Fee - \$100.00 |
|--|----------------|
| Signs – (Plans required showing sizes and colors)  |                |
| - Application  | Fee - \$150.00 |
| <ul> <li>Refacing (each side)</li> </ul>   | Fee - \$50.00  |
| <ul> <li>Temporary Sign / Renewal (Limit - 6 months) - Expires</li> </ul>                | Fee - \$100.00 |
| <ul> <li>Banners (Limit - 2 weeks)</li> </ul>  | Fee - \$75.00  |
| Temporary Trailer (Limit one year)   | Fee - \$100.00 |
| Temporary Trailer (Limit two weeks) - Expires  | Fee - \$25.00  |
| Fence - ALL FENCES EXCEPT POOL FENCES Height of fence  (POOL FENCES REQUIRE UCC PERMIT)  | Fee - \$50.00  |
| Retaining Walls (Plans required)   | Fee - \$100.00 |
| - 4 ft. or less  |                |
| <ul> <li>Over 4 ft. (REQUIRES BUILDING PERMIT AND ENGINEERING A</li> </ul>               | APPROVAL)      |
| Site Work Permit (Survey required)   | Fee - \$50.00  |
| <ul> <li>Driveways</li> </ul>  |                |
| <ul> <li>Patio / Pavers</li> </ul>   |                |
| <ul> <li>Filling (less than 50 cu. ft.)</li> </ul>                                       |                |
| - Clearing   |                |
| - Generator  |                |
| Other than listed above:   |                |
| Christopher Gruber / Zoning Official Approved / Denied 201-391-5732, ext. 223  COMMENTS: | Date           |
| Amount Paid: Check # Received by:  | Date:          |