



Job Number



ES017862609

Scan Code

ZRD1: Zoning Resolution Determination Form

NB #121011396

☒ Orient and affix BIS
job number label here ☒

Must be typewritten.

ZFA Deductions

1 Location Information Required for all requests on filed applications.

House No(s) 215

Street Name Chrystie Street

Borough Manhattan

Block 427

Lot 200

BIN 1078062

CB No. 103

2 Applicant Information Required for all requests on filed applications.

Last Name Cardoso

First Name Carlos

Middle Initial

Business Name Beyer Blinder Belle

Business Telephone (212) 770-7800

Business Address 41 East 11th Street

Business Fax

City New York

State NY

Zip 10003

Mobile Telephone

E-Mail ccardoso@bbbarch.com

License Number 029288

License Type ☐ P.E. ☒ R.A.

DOB PENS ID # (if available)

3 Attendee Information Required if different from Applicant in section 2 or no Applicant.Relationship to the property: ☒ Filing Representative ☐ Attorney ☐ Other:

Last Name Thomas/Anderson

First Name Stephanie/Robert

Middle Initial

Business Name JAM Consultants, Inc.

Business Telephone (212) 244-4427

Business Address 104 West 29th Street - 9th Floor

Business Fax (212) 244-4497

City New York

State NY

Zip 10001

Mobile Telephone

E-Mail sthomas@jamny.com

License/Registration # (if P.E./R.A./Attorney)

DOB PENS ID # (if available) 002783

4 Nature of Request Required for all requests. Only one request may be submitted per form.

Note: Use this form only to request Zoning Resolution determination (for all other requests, use CCD1 form)

Determination request issued to: ☒ Borough Commissioner's Office ☐ Technical AffairsJob associated with this request? ☒ Yes (provide job#/doc#/examiner name below) ☐ No

Job Number: 121011396

Document Number: 01

Examiner: MTF

Has this request been previously denied? ☐ Yes (attach all denied request form(s) and attachment(s)) ☒ No

Indicate total number of pages submitted with this request, including attachments: (attachment may not be larger than 11" x 17")

Indicate relevant Zoning Resolution section(s): BB 2012-XXX, ZR 12-10 "Floor Area"

Indicate all Buildings Department officials that you have previously reviewed this issue with (if any):

☐ Borough Commissioner☐ Code & Zoning Specialist☐ General Counsel's Office☐ Deputy Borough Commissioner☐ Chief Plan Examiner☒ Other: HUB Director Edwin Tang**ADMINISTRATIVE USE ONLY**

Reference #:

Appointment date:

Appointment time:

Appointment Scheduled With:

Comments:

REVIEWED BY

Jed Weiss

Executive Zoning Specialist

Reviewed By:

Date

Time:

APPROVED
WITH CONDITIONS

Control No. 33347

Date 4/7/14

Page 1 of 5

6/09

5	Description of Request (additional space is available on page 3)
Note: Buildings Department officials will only interpret or clarify the Zoning Resolution. Any request for variations of the Zoning Resolution must be filed with the Board of Standards and Appeals (BSA) or the Department of City Planning (DCP).	

Please itemize all attachments, including plans/sketches, submitted with this form. If request is based on a plan examiner objection, type in the applicable objection text exactly as it appears on the objection sheet.

Respectfully request concurrence that the proposed deductions to the Zoning Floor Area of NB #121011396 are in compliance with Buildings Bulletin 2012-XXX (Draft). This request specifically applies to the following areas of the building:

- 15th Floor, ATS Room #1560
- 15th Floor, Electric Room #1561

BB 2012-XXX, A(1) and A(2) allows for floor space occupied by HVAC Equipment (A[1][a]), Boilers and Hot Water Heating Equipment (A[1][b]), Electrical Conduits and Related Equipment (A[1][i]) and Manufacturer's recommended clearances (A[2][b]), to be excluded from the building's zoning floor area.

The following referenced plans are attached to illustrate that the 15th Floor ATS and Electric Rooms meet the requirements of BB 2012-XXX and therefore shall be excluded from the total Zoning Floor Area of the building. Your concurrence is herewith requested.

Attachments:

E-115.00 - 15th Floor Power Plan

END OF TEXT

Note: Buildings Department Determination will be issued on the ZRD1 Response Form

ADMINISTRATIVE USE ONLY	REVIEWED BY Jed Weiss Executive Zoning Specialist
	Reviewed By:  Date: _____ Time: _____

**APPROVED
WITH CONDITIONS**

Control No. **33347**
Date **4/7/14**
Page **2 of 5**

6 Description of Request (use this section if additional space is required for description)

SECTION 6 LEFT BLANK INTENTIONALLY

*Note: Buildings Department Determination will be issued on the ZRD1 Response Form***7 Statements and Signature** Required for all requests

I hereby state that all of the above information is correct and complete to the best of my knowledge. Falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. It is unlawful to give to a City employee, or for a City employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. Violation is punishable by imprisonment or fine, or both.

Name (please print)
Carlos Cardoso

Signature

Date



P.E. / R.A. Seal (apply seal, then sign and date over seal - not required for Attorneys or unfilled applications)

ADMINISTRATIVE USE ONLY

Reviewed By:

REVIEWED BY
Jed Weiss

Executive Zoning Specialist

Date

Time:

**APPROVED
WITH CONDITIONS**Control No. **33347**Date **4/7/14**Page **3 of 5**

ZRD1/CCD1 Response Form

Location Information (To be completed by a Buildings Department official if applicable)

House No(s) 215

Street Name Chrystie Street

Borough Manhattan

Block 427

Lot 200

BIN 1078062

Job No. 121011396

DETERMINATION (To be completed by a Buildings Department official)

Request has been: ☐ Approved ☐ Denied ☒ Approved with conditions

Follow-up appointment required? ☐ Yes ☒ No

Primary Zoning Resolution or Code Section(s): ZR 12-10 definition of "floor area"

Other secondary Zoning Resolution or Code Section(s):

Comments:

The request, to determine that for the building proposed, the mechanical space on the 15th floor in the ATS (Automatic Transfer Switch) and Electrical Rooms may be deducted from "floor area," is hereby approved with conditions.

With certain exceptions, the Department limits deductible mechanical space to:

- (i) floor space occupied by mechanical equipment, and
- (ii) floor space directly adjacent to mechanical equipment necessary for the purpose of access and servicing of such equipment (one may apply a 1-to-1 ratio of equipment area to adjacent service area, or alternately may rely on a manufacturer's requirement for the area needed to access and service a particular equipment item).

However, where 90 percent of a room may be excluded from floor area as per the preceding items (i) or (ii), and the remainder of such room consists exclusively of circulation space and is not occupied, then the entirety of such room, including interior walls, may be excluded from "floor area." Therefore, the request is approved with the following conditions:

1. Examiner to verify itemized mechanical deductions to establish when a room meets the 90 percent threshold for the deduction of an entire room from "floor area."

Note: If determination is not uploaded via eSubmit or scanned (whichever is applicable), it will be deemed invalid.

Name of Authorized Reviewer (please print): Jed A. Weiss

Title (please print): Executive Zoning Specialist (on behalf of NYC Development Hub)

Authorized Signature:

Date:

Time:

Issuers: write signature, date, and time on each page of the request forms; and attach this form.

Note: Determination will expire if construction document approval is not obtained within 12 months of issuance.

**APPROVED
WITH CONDITIONS**

Control No. 33347

Date 4/7/14

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