



PA1: Place of Assembly

Must be typewritten. Indicate reason for filing:

- ☐ New Filing
☐ Change to Owner/Lessee/Name of Estab ONLY
☒ Change to Layouts/Use and any other information

DEPT BLDGS Job No. 104635968



Scan Code ESHS6980742

1 Location Information Required for all applications.

House No(s) 428

Street Name LAFAYETTE STREET

Borough MANHATTAN

Block 545

Lot 40

BIN 1008804

C B No. 102

Zoning District(s) c2-5

Overlay(s)

Special Dist(s)

Zoning Map No. 8d

2 Applicant Information Required for all applications. Professionally certifying application? ☐ Yes ☐ No If yes, complete POC-1 form.

Last Name O'Connor

First Name Daniel

Middle Initial

Business Name Daniel O'Connor Architect

Business Telephone 2126850472

Business Address 150 East 49th Street

Business Fax

City New York

State NY

Zip 110017

Mobile Telephone

E-Mail briandevelopment@sbcglobal.net

License Number 28476

P.E.
R.A.

3 Filing Representative Complete if different from section 2. Fax, mobile phone, and e-mail are optional info

Last Name seay/mays/mcswain/oneal

First Name lisa/mary/zaid/michelle

Middle Initial

Business Name seay-yarbrough inc.

Business Telephone 2128689290

Business Address 604 - 5th avenue - 6th floor

Business Fax 2128689293

City new york

State ny

Zip 10020

Mobile Telephone 6467658309

E-Mail ttsy@verizon.net

Registration Number 2020

4 Place of Assembly Space Information Submit comments using an AI-1 form (optional). *Use 2014 Code occupancy designations only

Specific Floor(s) of PA Space FIRST

NB/A1 Job No Establishing PA 103483936

If Pre-BIS, provide BIN

Prior PA No (if applicable)

Irregular Floor Numbering? ☐ Yes ☒ No

Name of PA Establishment IL BASTARDO

Occupancy Designation	Cabaret	Number of Persons	Description Code
Primary Plan	☐ Yes ☒ No	316	22
Alt. 1 Plan	☐ Yes ☒ No		
Alt. 2 Plan	☐ Yes ☒ No		

5 Statements and Signatures of Applicant and Owner PE/RA not required for change to owner/lessee/name of establishment only.

Falsification of any statement is a misdemeanor and is punishable by 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. Applicant: I prepared or supervised the preparation of the submittal documents herewith submitted and to the best of my knowledge and belief, the submittal documents and work shown thereon comply with the provisions of the NYC Administrative Code and other applicable laws and regulations, except as set forth in the accompanying documents. I acknowledge that I have read and complied with all instructions pertaining to this application and submittal documents submitted. Owner: I have authorized the applicant to file this application for the work specified herein and all future amendments.

P.E. / R.A Name (print)

Signature

Date

PE / RA Seal (apply seal, then sign and date)

Individual/Lessee Responsible for Annual Renewal of PA (if not owner)

Name (print): DIEGO ENRICO MALTAK

Relationship to Owner

Business Name/Agency: Metro Management Dev Inc

Street Address 108 West 73rd Street

City: NEW YORK

State: NY Zip 10023

Telephone Number: 2127872200

Fax:

E-Mail Address

Owner ☐ Condo/Co-Op

type: ☐ Corporation

☐ Individual

☒ Partnership

☐ DCAS

☐ DOE

☐ HHC

☐ NYCHA

☐ HPD

☐ NYS

☐ Other Government

Is the deed-holder a non-profit per 28-112.1? ☐ Yes ☐ No

Name (print): Joseph Doren

Relationship to Owner: Manager

Business Name/Agency: Metro Management Dev Inc

Street Address: 42-25 21 Street

City L.I.C.

State NY Zip 11101

Telephone Number: 9179122620

Fax: 7187067760

E-Mail Address jdoren@metomanagementdev.com

Signature and Date