DEPT.BLDGS 110236897 Job Number

SC080731626 Scan Code

OP-98 Notice/Results—Self-Certification of Plumbing, Sprinkler, Standpipe Inspection(s) & Test(s)

A copy of this completed notice must be retained for re-submission with results.

Document No. 01 | Permit Type (check one only): ☑ PL ☐ SP ☐ SD ☑ ARA

Borough Manhattan | Block 413 | Lot 43 | House No 261 | Street Name Broome Street

2 Permit Applicant

E-Mail: Flytigerplumbing@yahoo.com | Business Phone (212) 966-9738 | Fax No. (212) 966-9798

Last Name Cheung | First Name Kin | M.I. | Business Name Flytiger Plumbing & Heating LTD.

Address 122 Forsyth Street | City New York | State NY | ZIP 10002 | License No. 1667 | ☑ LMP ☐ LFSC

3 Inspection Data

Inspection/test scheduled for: 09/26/08 (mmddyy) Time: ☐ 8:00am ☐ 8:30 ☐ 9:00 ☐ 9:30 ☐ 10:00 ☐ 10:30 ☐ 11:00 ☐ 11:30 ☐ 12:30pm

Apts/Floors: 1st floor | ☐ 1:00pm ☑ 1:30 ☐ 2:00 ☐ 2:30 ☐ 3:00 | Meeting Location: In front of the building.

4 Notice/Result (Select one: PL, SP, SD only)

Systems: Inspections	Plumbing (PL) Underground Notice	Underground Results Pass	Underground Results Fail	Roughing Notice	Roughing Results Pass	Roughing Results Fail	Finish Notice	Finish Results Pass	Finish Results Fail
Sprinkler - PL		☐	☐		☐	☐	☐	☐	☐
Water/Sanitary - PL	☐	☐	☐	☐	☐	☐		✓	
Storm - PL	☐	☐	☐	☐	☐	☐		☐	☐
Gas - PL		☐	☐	☐	☐	☐		☐	☐
Medical Gas - PL		☐	☐		☐	☐		☐	☐

Tests	Notice	Results Pass	Results Fail
Hydrostatic - PL		☐	☐
Water - Sanitary		☐	☐
Pressure - Water		☐	☐
Water Storm	☐	☐	☐
Gas	☐	☐	☐
Medical Gas		☐	☐

Systems: Inspections	Sprinkler (SP) Underground Notice	Underground Results Pass	Underground Results Fail	Roughing Notice	Roughing Results Pass	Roughing Results Fail	Finish Notice	Finish Results Pass	Finish Results Fail
Sprinkler - SP		☐	☐		☐	☐	☐	☐	☐

Tests	Notice	Results Pass	Results Fail
Hydrostatic - SP		☐	☐
Dry Pipe Valve	☐	☐	☐
Booster Pump		☐	☐

Systems: Inspections	Standpipe (SD) Underground Notice	Underground Results Pass	Underground Results Fail	Roughing Notice	Roughing Results Pass	Roughing Results Fail	Finish Notice	Finish Results Pass	Finish Results Fail
Fire Standpipe - SD		☐	☐		☐	☐	☐	☐	☐

Tests	Notice	Results Pass	Results Fail
Hydrostatic - SD		☐	☐
Fire Pump	☐	☐	☐

2008 SEP 29 AM 10: 18

NYC DEPT OF BLDGS INSPECTION RECEIVED

Additional Information/Comments:

☐ Submitted with minor variations, described here:

☐ Legalization ☐ Gas to Gas Appliance Direct Replacement ☐ Remove/Cap ☐ Detention ☐ Drywell/Retention

5 Gas Meters/Risers Data

(Check all applicable to this inspection. Include gas usages for each listed meter(s)/riser(s)) ☐ Gas requested for listed meters and risers

No. of Meters: Location(s) (Floor/Apt. for this inspection): No. of Risers: Location(s) (Floor/Apt. for this inspection):

Gas usage: ☐ Heat ☐ Boiler Pilot for oil burner ☐ Water Heater ☐ Dryer

☐ Cooking ☐ Tankless Coil ☐ HVAC ☐ Fire Place ☐ Other (describe):

6 Certifying Applicant

E-Mail: Flytigerplumbing@yahoo.com | Business Phone (212) 966-9738 | Fax No. (212) 966-9798

Last Name Cheung | First Name Kin | M.I. | Business Name Flytiger Plumbing & Heating LTD.

Address 122 Forsyth Street | City New York | State NY | ZIP 10002 | License No. 1667 | ☑ LMP ☐ LFSC ☐ P.E. ☐ R.A.

7 Applicant Statements and Signatures

☑ All Comments resolved, review for sign-off ☐ All required back-up documents attached

I certify the statements herein are correct and comply with the NYC Building code. I meet the requirements of the NYC Building code as they relate to the experience requirements set forth for gas tests. I realize falsification of any statement is a misdemeanor under §26-124 of the Administrative code punishable by a fine or imprisonment or both and may result in removal from participation in the self-certification program and/or disciplinary action by the Licensed Master Plumber or Licensed Fire Suppression Piping Contractor License Board.

Print Name of Certifying Applicant	SEAL	Print Name of Permit Applicant or Alternative licensee from same firm (LMP/LFSC)	SEAL
Kin Cheung		Kin Cheung	
Signature		Signature	
Date 09/26/2008		Date 09/26/2008	

FOR DOB USE ONLY

Reviewed by: _____, Date: _____, Entered by: _____, R.S.O. by: _____, S/O by: _____

Revised 12-04-2006 OP-98