



Buildings

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.



1 Permit No. 120267120		Document No. 01		Permit Type (check one only): ☒ PL ☐ SP ☐ SD ☐ LAA	
Borough MANHATTAN Block 792 Lot 61 House No 144		Street Name WEST 17 STREET			
2 Permit Applicant E-Mail: CAPEPLBG2@YAHOO.COM Business Phone (718) 882-1281 Fax No. (718) 655-7339					
Last Name CASH		First Name GERI		M.I. K Business Name CAPE PLUMBING INC.	
Address 4008A Bronxwood Ave City BRONX		State NY		ZIP 10466 License No. 001137 ☒ LMP ☐ LFSC	
3 Inspection Data Inspection/test scheduled for: 09/23/10 (mmddyy) Time: ☐ 8:00am ☒ 8:30 ☐ 9:00 ☐ 9:30 ☐ 10:00 ☐ 10:30 ☐ 11:00 ☐ 11:30 ☐ 12:30pm					
Apts and Floors: 005 ☐ 100pm ☐ 1:30 ☐ 2:00 ☐ 2:30 ☐ 3:00 Meeting Location:					

4 Notice/Result (Select one: PL, SP, SD only)									
Systems: Inspections									
Plumbing (PL)									
Underground Roughing Finish									
Notice Results Notice Results Notice Results									
Pass Fail									
Sprinkler - PL									
Water/Sanitary - PL									
Storm - PL									
Gas - PL									
Medical Gas - PL									
Tests									
Notice Results									
Pass Fail									
Hydrostatic - PL									
Water - Sanitary									
Pressure - Water									
Water Storm									
Gas									
Medical Gas									
Gas Tested at psi									
☐ 3 psi ☐ 50 psi									
☐ 90 psi ☐ 100 psi									

Systems: Inspections									
Sprinkler (SP)									
Underground Roughing Finish									
Notice Results Notice Results Notice Results									
Pass Fail									
Sprinkler - SP									
Tests									
Notice Results									
Pass Fail									
Hydrostatic - SP									
Dry Pipe Valve									
Booster Pump									

Systems: Inspections									
Standpipe (SD)									
Underground Roughing Finish									
Notice Results Notice Results Notice Results									
Pass Fail									
Fire Standpipe - SD									
Alarm Sys 64/09									
Hydrostatic - SD									
Fire Pump									
Hydrostatic 63/09									
☐ 75 Ft ☐ 100 Ft									

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.): No. of Risers: Location(s) (Floor/Apt.): ☐ Welded Gas Piping

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

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

6 Certifying Applicant E-Mail: CAPEPLBG2@YAHOO.COM Business Phone (718) 882-1281 Fax No. (718) 655-7339

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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 §28-211.1 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 GERI CASH	SEAL	Print Name of Permit Applicant or Alternative licensee from same firm (LMP/LFSC) GERI CASH	SEAL
Signature		Signature	
Date 09-23-2010		Date 09-23-2010	

Reviewed by: AG, Date: 9/28, Entered by: [Signature], R.S.O. by: [Signature], S/O by: [Signature]