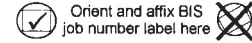




AI1: Additional Information
Must be typewritten.



Page number 1 of 1 BIS Document No. 15

1 Location and Job Information Required for all applications.

House No(s) 292 Street Name 5th AVENUE
Borough MANHATTAN Block 832 Lot 44 BIN 1015788 CB No. 105

2 Revisions to Plans/Drawings Required whenever updating plans. All revisions for each page must be clearly described in section 3.

Submission is part of a Post Approval Amendment (PAA)? ☒ Yes PW1 required ☐ No Indicate all actions for this submission:

Action	Original/New/ Omit Page ID	Superseding Page ID	Action	Original/New/ Omit Page ID	Superseding Page ID	Action	Original/New/ Omit Page ID	Superseding Page ID	Action	Original/New/ Omit Page ID	Superseding Page ID
S	A-200.03	A-200.04	S	A-204.03	A-204.04	S	A-208.02	A-208.03			
S	A-201.02	A-201.03	S	A-205.03	A-205.04	S	A-716.00	A-716.01			
S	A-202.03	A-202.04	S	A-206.03	A-206.04						
S	A-203.03	A-203.04	S	A-207.03	A-207.04						

For "Action" use "N" for new page, "S" for superseding page, "O" for omitting page. Is this section continued on additional AI1 forms? ☐ Yes ☒ No

3 Additional Information Required for all applications.

HEREBY FILING REVISED PLANS TO SHOW AS-BUILT CONDITIONS

Narrative:

A-200 thru A-716- correct note for compliance with fire service access elevator

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. I understand that if I am found after hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

Name (please print)

GENE KAUFMAN 0170307

Signature



4.6.22

Date

P.E. / R.A. Seal (apply seal, then sign and date over seal)