

ZRD2: Zoning Challenge & Appeal

Members of the public use this form to submit a public zoning challenge.

ZRD2 Form - Rev. 6/09

PW1A Schedule A: Occupancy/Use

Provides supplemental occupancy/use information to PW1. For jobs filed prior 31, 2014 [download the old 2008 Form](#).

PW1A Form - Rev. 12/22

PW1A Instructions

PW1B Schedule B: Plumbing/Sprinkler/Standpipe

Provides supplemental information involving plumbing, sprinkler and standpipe

PW1B Form - Rev. 12/14

PW1B Instructions

PW1C Schedule C: Heating and Combustion Equipment

Provides supplemental information involving heating and combustion equipment

PW1C Form - Rev. 9/16

PW1C Instructions

PLEASE NOTE B.I.S ALT-1 # 121324520
WAS FILED 07-18-2012
ACCORDINGLY SO, THE
OLD SCHEDULE "A" IS USED
IN THIS PAA DOC # 15
ALREADY CREATED IN BIS
06-27-2025.



[CLICK HERE TO SIGN UP FOR BUILDINGS NEWS](#)

NYC Department of Buildings
Application Details

The below information does not include work types submitted in **DOB NOW**; use the **DOB NOW Public Portal** to access **DOB NOW** records.

JUMP TO: Doc 1

Premises: 20 7 AVENUE MANHATTAN
BIN: 1011094 Block: 617 Lot: 55

Job No: 121324520

Document: 01 OF 14

Job Type: A1 - ALTERATION TYPE 1

Document Overview	Items Required	Virtual Job Folder	All Permits	Schedule A	Schedule B
Fees Paid	Forms Received		All Comments	C/O Summary	Plumbing Inspections
Crane Information	Plan Examination			C/O Preview	
After Hours Variance Permits					

DOB NOW: Inspections

This job is not subject to the Department's Development Challenge Process. For any issues, please contact the relevant borough office.

Last Action: PERMIT ISSUED - ENTIRE JOB/WORK 11/27/2024 (R)

Application approved on: 01/11/2013

Pre-Filed: 07/18/2012 Building Type: Other

Estimated Total Cost: \$25,241,170.00

Date Filed: 07/18/2012

Electronically Filed: Yes

Fee Structure: EXEMPT

Review is requested under Building Code: 1968

Hub Job [†]: Yes

[Job Description](#) [Comments](#)

1 Location Information (Filed At)

House No(s): 20 Street Name: SEVENTH AVENUE

Borough: Manhattan

Block: 617

Lot: 55

BIN: 1011094

CB No: 102

Work on Floor(s): CEL,PEN,ROF 001 thru 006

Apt/Condo No(s):

Zip Code: 10011

2 Applicant of Record Information

Name: JEFFREY BRAND

Business Name: PERKINS EASTMAN ARCHITECTS, PC

Business Address: 115 FIFTH AVENUE NEW YORK NY 10003

E-Mail: J.BRAND@PERKINSEASTMAN.COM

Business Phone: 212-353-7200

Business Fax: 212-353-7676

Mobile Telephone:

License Number: 015809

Applicant Type: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ R.L.A. ☐ Other

Directive 14 Applicant

Not Applicable

Previous Applicant of Record

Name: FRANCIS C GUNTHER



P.A.A DOC#15 121.324-520

PW1A: Schedule A - Occupancy / Use

Orient and affix BIS job number label here

This form can only be used for applications processed through DEAR prior to June 30, 2008.

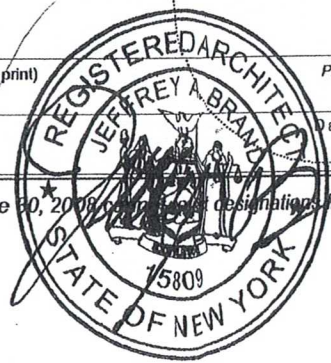
Must be typewritten.
Sheet 1 of 5

Floor	Existing Legal Use						Proposed Use					
	Maximum Number of Persons	Live Load (psf)	2008 Code Designations?*	Building Code Occupancy Group(s)	Dwelling/ Rooming Units (BC)	Zoning Use Group(s)	Maximum Number of Persons	Live Load (psf)	2008 Code Designations?*	Building Code Occupancy Group(s)	Dwelling/ Rooming Units (BC)	Zoning Use Group(s)
Cel	5	50	☒ No	B-2	-	4	138	50	☐ No	B	-	VII
	Description Passenger Car Garage, Office & Mechanical Equipment, Oxygen Storage Rooms (Additional Live Loads 100, 175)						Description Offices, Staff Lounge, Testing Laboratory, Food Service, Pharmacy					
Cel			☐ No				2	100	☐ No	S-1	-	VII
	Description						Description Storage					
Cel			☐ No				19	100	☐ No	S-2	-	VII
	Description						Description Staff Lockers					
Cel			☐ No				N/A	100	☐ No	F-2	-	VII
	Description						Description Mechanical Equipment Rooms					
1	216	100	☒ No	H-2		4	177	100	☐ No	I-2	-	III(A)
	Description Hospital Offices, and Clinics (Additional Live Load 50)						Description Offices, Exam Rooms, Ambulance Drop-Off					

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 hereby state all the above information is complete and correct to the best of my knowledge.

Applicant's Name (please print)
Jeffrey Brand
Signature

P.E. / R.A. seal required
Date



*Applications processed through DEAR prior to June 30, 2008, may use old designations from the 2008 Code.

PW1A: Schedule A - Occupancy / Use

☒ Orient and affix BIS
 job number label here ☒

Must be typewritten.

This form can only be used for applications processed through DEAR prior to June 30, 2008.

Sheet 2 of 5

Floor	Existing Legal Use						Proposed Use					
	Maximum Number of Persons	Live Load (psf)	2008 Code Designations?*	Building Code Occupancy Group(s)	Dwelling/ Rooming Units (BC)	Zoning Use Group(s)	Maximum Number of Persons	Live Load (psf)	2008 Code Designations?*	Building Code Occupancy Group(s)	Dwelling/ Rooming Units (BC)	Zoning Use Group(s)
1			☒ No		-		3	100	☐ No	S-2	-	III(A)
	Description						Description					
							Loading Berth					
1			☒ No		-		11	100	☐ No	S-2	-	III(A)
	Description						Description					
							Storage					
1			☒ No		-		N/A	100	☐ No	F-2	-	III(A)
	Description						Description					
							Mechanical Equipment Rooms					
2	54	40	☒	H-2	-	4	90	50	☐	B	-	VII
	Description						Description					
	Storage, Roof and Mechanical Equipment (Formerly the 3rd floor - Additional Live Loads 120 & 150)						Out-Patient Treatment Rooms and Accessory Uses					
3	216	50	☒	E	-	4	15	50	☐ No	S-2	-	VII
	Description						Description					
	Hospital Offices & Clinics, MH EQ, Lockers (Additional Live Load 150)						Storage					

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Applicant's Name (please print)

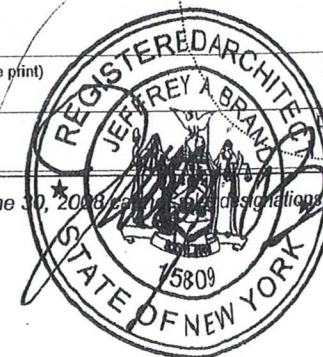
Jeffrey Brand

Signature

P.E./R.A. seal required

Date

*Applications processed through DEAR prior to June 30, 2008 carry forward designations from the 2008 Code.



PW1A: Schedule A - Occupancy / Use

☒ Orient and affix BIS
pb number label here ☒

Must be typewritten.

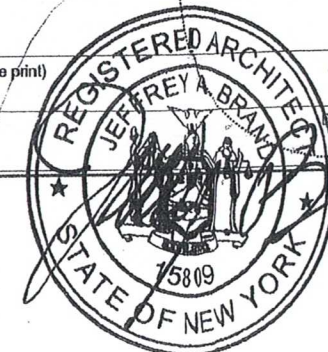
Sheet **3** of **5**

Floor	Existing Legal Use						Proposed Use *Use 2008 Code equivalents only even for older Codes.					
	Maximum Number of Persons	Live Load (psf)	2014 Code Designations?	Building Code Occupancy Group(s)	Dwelling/ Rooming Units (BC)	Zoning Use Group(s)	Maximum Number of Persons	Live Load (psf)	2014 Code Designations only*	Building Code Occupancy Group(s)	Dwelling/ Rooming Units (BC)	Zoning Use Group(s)
3			☐ Yes ☐ No				N/A	40	☒ Yes	F-2	-	VII
	Description						Description					
							Mechanical Equipment Rooms					
4	295	80	☐ Yes ☒ No	E	-	4	263	80	☒ Yes	B	-	VII
	Description						Description					
	Doctor's Offices and Roof (Formerly the 4th Floor)						Ambulatory Treatment Rooms and Accessory Uses					
4			☐ Yes ☐ No				15	80	☒ Yes	I-2	-	III(A)
	Description						Description					
							In-Patient Treatment Area and Accessory Uses					
5			☐ Yes ☐ No				98	40	☒ Yes	I-2		III(A)
	Description						Description					
	Doctor's Offices and Roof (Formerly the 5th Flr - Additional Live Load 80 & 150)						In-Patient Bed Unit & Accessory Uses					
5			☐ Yes ☐ No				153	40	☒ Yes	B		VII
	Description						Description					
							Ambulatory Treatment Rooms and Accessory Uses					

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Applicant's Name (please print)
Jeffrey Brand
Signature

P.E. / R.A. seal required
Date



PW1A: Schedule A - Occupancy / Use

 Orient and affix BIS job number label here 

Must be typewritten.

Sheet **4** of **5**

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Floor	Existing Legal Use						Proposed Use					
	Maximum Number of Persons	Live Load (psf)	2008 Code Designations?*	Building Code Occupancy Group(s)	Dwelling/ Rooming Units (BC)	Zoning Use Group(s)	Maximum Number of Persons	Live Load (psf)	2008 Code Designations?*	Building Code Occupancy Group(s)	Dwelling/ Rooming Units (BC)	Zoning Use Group(s)
5			☒ No		-		N/A	150	☒ No	F-2	-	VII
6	Description						Description	Mechanical Equipment Rooms				
		40	☒	E	-	6, 2	124	80	☐	B	-	VII
PH	Description	Offices, Pantry, Roof, Mechanical Equipment Room (Additional Live Loads of 80 & 150)					Description	Ambulatory Treatment Rooms and Accessory Uses				
		150	☒ No				N/A	150	☐ No	F-2	-	VII
	Description						Description	Mechanical Equipment				
			☐ No						☐ No			
	Description						Description					
			☐ No						☐ No			

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Applicant's Name (please print)

Jeffrey Brand

Signature

P.E./R.A. seal required

Date

*Applications processed through DEAR prior to June 30, 2008, may use designations from the 2008 Code.



2 Building Notes to appear on the Certificate of Occupancy**Note #1:**

The CRFN numbers associated with this job are as follows: 20120000488992 and 20120000488993.

Note #2:

The following floors have mix live loads, Cellar @ 100 and 175psf, First @ 100, 120 & 150psf, Second @ 50 & 150psf, Third @ 50, 120 & 150psf, Fifth @ 80 & 150psf, lastly Sixth @ 80 & 150psf.

3 Applicant's Statements and Signatures *Required for all applications.*

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Name (please print)

Jeffrey Brand

Signature

Date

Internal Use Only

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