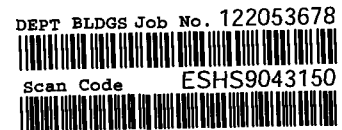




TR2: Technical Report
Concrete Sampling and Testing
Must be typewritten.



Sheet number 1

1 Location Information *Required for all applications.*

House No(s) 25	Street Name GREAT JONES STREET			
Borough MANHATTAN	Block 530	Lot 19	BIN 1080067	CB No. 102
Work on Floor(s)			Apt/Condo No(s)	

2 Licensed Concrete Testing Lab Information *Required for all applications.*

Director Last Name OZAETA	Director First Name GEORGE	Director Middle Initial S.
Business Name REGIONAL TESTING CORP.		Business Telephone 347-221-0110
Business Address 1150 CLOSE AVENUE		Business Fax 347-221-0111
City BRONX	State NY	Zip 10472
Mobile Telephone		
E-Mail info@regionaltestingcorp.com		
Director's Lic. Number 083012	<input checked="" type="checkbox"/> P.E. <input type="checkbox"/> R.A.	Concrete Testing Lab Lic. Number 086

3 Licensed Concrete Testing Laboratory's Identification of Responsibilities *Required prior to Permit.*

Check all that apply below:

I certify that I am the director of the licensed concrete testing laboratory accepting responsibility for conducting the testing in accordance with BC 1905.6 and BC 1704.1. I further certify that I have read the applicable sections of the New York City Construction Codes in connection with the testing of concrete and licensed concrete testing laboratories as well as 1 RCNY §5-02 and 1 RCNY §101-07(c)(6), which specifies the qualifications and duties required of a licensed concrete testing laboratory and that this licensed testing laboratory meets those qualifications for the work for which I take responsibility. I agree that both I and the licensed concrete testing laboratory will comply with all provisions of the New York City Construction Codes as well as 1 RCNY §5-02 and 1 RCNY §101-07(c)(6). I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

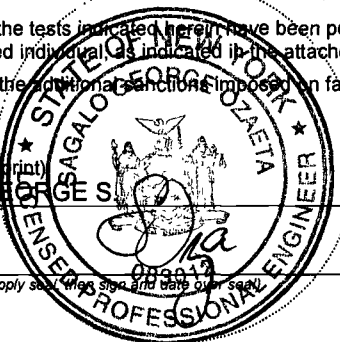
Change of Applicant: I am a newly designated individual responsible for the testing specified herein and I hereby state that:

- ☐ None of the tests indicated herein have been performed to date by the previously designated individual.
- ☐ Some of the tests indicated herein have been performed by the previously designated individual as indicated in the attached report.

I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

Name (please print) OZAETA GEORGE S. 1-06-15
Signature _____ Date _____

P.E. / R.A. Seal (apply seal when signed and date of seal)



4 Design Applicant's Statement and Signature *P.E./R.A. Required prior to Permit.*

- ☐ I certify that the licensed concrete testing laboratory specified in section 2 above and engaged by the owner to perform tests on the work at the location specified in section 1 above is acceptable. (BC 1704.1)

Name (please print) _____

Signature _____

Date _____

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

5 Building Owner's Statement and Signature *Required prior to Permit.*

I certify that I have employed the licensed concrete testing laboratory specified in section 2 above in accordance with BC 1704.1. 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 a fine or imprisonment, 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 (print) _____

Title _____

Signature _____

Date _____

STOP HERE PRIOR TO PERMIT