



PW7:

Letter of Completion Request

JOB #: 123031977

(Must be typewritten)

1 LOCATION INFORMATION

House No(s) 5 Street Name WEST 31 STREET Work Proposed on Floor No(s) 004,006,007,009,010
Borough MANHATTAN Block 833 Lot 36 BIN 1015815 CB No. 105

2 REQUESTOR INFORMATION

Individuals Relationship to Job (Example: Applicant, Owner Filing Representative) APPLICANT

Last Name CHOI

First Name JUNG

Middle Initial H

Business Name JUNG H. CHOI ARCHITECT, P.C.

Business Telephone (212) 643-0402

Business Address 34 WEST 27 STREET, SUITE #301

Business Fax

City NEW YORK

State NY

Zip 10001

Mobile Telephone

E-Mail JC@M55K.COM

License Number 031839

3 TYPE OF REQUEST

☒ Letter of Completion (Directive 14 or Non-Directive 14)

4 STATEMENTS AND SIGNATURES

By signing below, I understand that all the information provided is true to the best of my knowledge and that falsification of any statement is a misdemeanor under § 26-124 of the NYC Administrative Building Code and 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.

Requestor Signature

JUNG H. CHOI

Date 04-22-2021

Disapproval Reasons Review request cannot be processed for the following reasons:

- | | | | |
|--|--|---|---|
| ☐ Fees unpaid | ☐ Open ECB/DOB Violation(s) | ☐ Incomplete PAA | ☐ Audit Conditions Pending / Job on Hold |
| ☐ Missing inspection Sign-off(s): ☐ Construction ☐ Plumbing | ☐ Electrical | ☐ Other: _____ | |
| ☐ Missing Required item(s): _____ | ☐ TR-1 Error(s): _____ | | |
| ☐ Form(s) missing/incomplete: Form(s) _____ | Section(s)/Reason(s) _____ | | |
| ☐ Other: _____ | | | |