



PA1: Place of Assembly

Must be typewritten Indicate reason for filing:

- ☐ New Filing
☐ Change to Owner/Lessee/Name of Estab ONLY
☒ Change to Layouts/Use and any other information



1 Location Information Required for all applications.

House No(s) 541 Street Name AVENUE OF THE AMERICAS
Borough MANHATTAN Block 790 Lot 37 BIN 1014528 C.B. No. 104
Zoning District(s) C6-2M General Central Commercial Dist Overlay(s)
Special Dist(s) Zoning Map No. 12C

2 Applicant Information Required for all applications. Professionally certifying application? ☐ Yes ☐ No If yes, complete POC-1 form.

Last Name GOLDMAN First Name ROBERT Middle Initial
Business Name THE CHESAPEAKE DESIGN GROUP Business Telephone 410-837-3622
Business Address 419 NORTH CHARLES STREET Business Fax
City BALTIMORE State MD Zip 21201 Mobile Telephone
E-Mail robert@cdgarchitects.com License Number 020040 ☐ P.E. ☒ R.A.

3 Filing Representative Complete if different from section 2. Fax, mobile phone, and e-mail are optional info

Last Name Nunez/Cruz/Leong First Name Ismael/Rob/George Middle Initial
Business Name Empire City Consultants Inc. Business Telephone 212-228-1131
Business Address 15 West 36th Street, 3rd Floor Business Fax
City New York City State NY Zip 10018 Mobile Telephone
E-Mail iready@nycecc.com Registration Number

4 Place of Assembly Space Information Submit comments using an AI-1 form (optional). *Use 2014 Code occupancy designations only.

Specific Floor(s) of PA Space 001, 002
122288416 If Pre-BIS, provide BIN:
Prior PA No. (if applicable) 120061850 Irregular Floor Numbering? ☐ Yes ☒ No
Name of PA Establishment McDonald's

5 Statements and Signatures of Applicant and Owner PE/RA not required for change to owner/lessee/name of establishment only.

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. Applicant: I prepared or supervised the preparation of the submittal documents herewith submitted and to the best of my knowledge and belief, the submittal documents and work shown thereon comply with the provisions of the NYC Administrative Code and other applicable laws and regulations, except as set forth in the accompanying documents. I acknowledge that I have read and complied with all instructions pertaining to this application and supplementary schedules submitted. Owner: I have authorized the applicant to file this application for the work specified herein and all future amendments.

P.E. / R.A. Name: ROBERT GOLDMAN 04-04-2019

Signature: Date

PE / RA Seal (Professional Engineer/Architect Seal)

Individual/Lessee/Operator/Agency for Annual Renewal of PA (if not owner)

Name (print): PAUL HENDEL

Relationship to Owner: OPERATOR

Business Name/Agency: P. Hendel Products

Street Address: 146 Horton Avenue

City: Lynbrook State: NY Zip: 11563

Telephone Number: 516-398-4990 Fax: 516-256-0285

E-Mail Address:

Owner ☒ Corporation ☐ Partnership ☐ NYC Agency
type: ☐ Individual ☐ NYCHA / HHC ☐ Other Govt.

☐ Condo Unit Owner or Co-Op Tenant-Shareholder

Is the deed-holder a non-profit per 28-112.1? ☐ Yes ☒ No

Name (print): BRIAN T SHEEDY

Relationship to Owner: SENIOR COUNSEL

Business Name/Agency: MCDONALDS CORPORATION

110 N. Carpenter Street

CHICAGO IL 60607

Telephone Number: 630-623-8437 Fax:

E-Mail Address: BRIAN.SHEEDY@US.MCD.COM

Signature and Date: Brian T Sheedy

6/4/19