



AI1: Additional Information Must be typewritten.

☒ Orient and affix BIS job number label here ☒

Page number 1 of 1 BIS Document No. 02

1 Location and Job Information Required for all applications.

House No(s) 110 Street Name E 40th St.

Borough MANHATTAN Block 895 Lot 7501 BIN 1019495 CB No. 106

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-001.00	A-001.01	S	P-001.00	P-001.01						
S	A-002.00	A-002.01	S	EN-001.00	EN-001.01						
S	A-003.00	A-003.01									
S	M-001.00	M-001.01									

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.

HEREWITH SUBMIT AI1 FOR POST APPROVAL AMENDMENT:

A-001.01 -REVISED SCOPE OF WORK; MEDICAL OFFICE IS PROPOSED.

A-002.01 -MINOR CHANGE TO CONSTRUCTION PLAN AND ENERGY ANALYSIS.

A-003.01 -MINOR CHANGE TO REFLECTED CEILING PLAN AND LIGHTING LEGEND.

M-001.01 -MINOR CHANGE TO MECHANICAL PLAN AND VENTILATION INDEX.

P-001.01 -MINOR CHANGE TO PLUMBING PLAN AND RISER DIAGRAMS. REMOVED DENTAL EQUIPMENT PLUMBING KEY AND PROVIDED PLUMBING LEGEND.

EN-001.01 -REVISED SCOPE OF WORK; MEDICAL OFFICE IS PROPOSED. MINOR CHANGE TO ENERGY ANALYSIS AND VENTILATION INDEX.

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)
NING LU 11/12/2021
Signature Date
P.E. / R.A. Seal (apply seal, then sign and date over seal)

