



DEPT OF BLDGS 123738232

Job Number

DEPT BLDGS Job No. 123738232



Scan Code

ESHS3228137



ES404659929

Scan Code

PW7:

Letter of Completion Request

(Must be typewritten)

1 LOCATION INFORMATION

House No(s) 430

Street Name PARK AVE

Work Proposed on Floor No(s) 18,19, ROOF

Borough MANHATTAN

Block 1291

Lot 38

BIN 1035772

CB No. 105

2 REQUESTOR INFORMATION

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

Last Name PAPAZIAN

First Name ELIZABETH

Middle Initial

Business Name ROBERT PAPAZIAN ARCHITECT PC

Business Telephone 2124069565

Business Address 262 WEST 38TH STREET, STE 304

Business Fax

City NEW YORK

State NY

Zip 10018

Mobile Telephone

E-Mail LP@REPARCH.NET

License Number 004185

3 TYPE OF REQUEST

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

REQUEST LETTER OF COMPLETION. PLEASE ACCEPT FINAL PW3 AND FDNY LOA.

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

Date 1/27/22

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 |
| ☐ Missing Required item(s): | ☐ Other: _____ | | |
| ☐ Form(s) missing/incomplete: Form(s) _____ | ☐ TR-1 Error(s): _____ | | |
| ☐ Other: _____ | Section(s)/Reason(s) _____ | | |