



PW7:

Letter of Completion Request

(Form must be typewritten)

1 LOCATION INFORMATION

House No(s) 1037 Street Name 2nd Avenue Work Proposed on Floor No(s) 001

Borough Manhattan Block 1328 Lot 21 BIN 1038575 CB No. 106

2 REQUESTOR INFORMATION

Individual's Relationship to Job (i.e., Applicant, Owner Filing Representative)

Last Name LU First Name NING Middle Initial

Business Name LU NING ARCHITECTURE PLLC Business Telephone 7183958637

Business Address 136-20 38TH AVENUE, SUITE 9C Business Fax

City FLUSHING State NY Zip 11354 Mobile Telephone

Email NINGARCH@GMAIL.COM License No. 032658

3 TYPE OF REQUEST

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

☐ Notification of removal of chute, fence, supported scaffold, sidewalk shed, temporary hoist, support of excavation, or other temporary construction equipment. No final inspection is required per LL146/21.

4 STATEMENTS & 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 § 28-320.6.3 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's Signature:

Date: 8/2/2024

FOR OFFICE USE ONLY

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
- ☐ Missing inspection Sign-off(s): ☐ Construction ☐ Plumbing ☐ Electrical ☐ Other: _____
- ☐ Missing Required Item(s): _____ TR1 Error(s): _____
- ☐ Form(s) Missing/Incomplete: Form(s) _____ Section(s)/Reason(s): _____
- ☐ Other: _____