



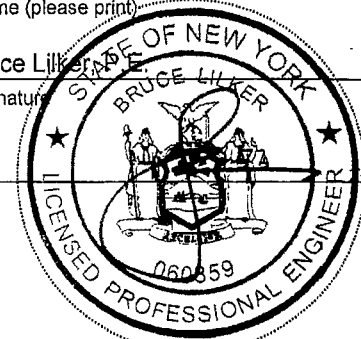
PW4: Application for Certificate of Compliance
for Equipment

Must be typewritten.

DEPT BLDGS Job No. 123765666



Scan Code ESHS0949888

1 Filing Status	Job Number 123765666																											
2 Type of Equipment <i>Required for all applications.</i>	☒ Heating System (Not including boilers) ☒ Ventilation System ☒ Air Conditioning System ☐ Refrigeration																											
3 Location Information <i>Required for all applications.</i>	House No. 7 Street Name Hanover Square Apt/Condo No(s) n/a Borough Manhattan Block 30 Lot 19 BIN 1000855 CB No. 101 Work on Floor Cel, 1, 2, 14																											
4 Applicant Information <i>Required for all applications.</i>	Last Name Lilker First Name Bruce Middle Initial Business Name Lilker Associates Business Telephone (212) 695-1000 Business Address 1001 Avenue of the Americas Business Fax (212) 695-1299 City New York State NY Zip 10018 Mobile Telephone E-Mail blilker@lilker.com ☒ P.E. ☐ R.A. ☐ Other License Number 060859																											
5 Equipment Specifications <i>Instructions for section (complete all).</i>	<table border="1"><thead><tr><th>Item—Manufacturer/Trade Name</th><th>Floor</th><th>No. of Items</th><th>Certification Number for Listing</th><th>Capacity: BTUs/CFM</th></tr></thead><tbody><tr><td>SAC-1-13/Trane/M# GEHE18041H35BOBRF0111004</td><td>1</td><td>1</td><td>Serial # W20D10270</td><td>5,000 CFM</td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></tbody></table>			Item—Manufacturer/Trade Name	Floor	No. of Items	Certification Number for Listing	Capacity: BTUs/CFM	SAC-1-13/Trane/M# GEHE18041H35BOBRF0111004	1	1	Serial # W20D10270	5,000 CFM															
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6 Statement and Signatures <i>Required for all applications.</i>	The owner certifies that he authorizes the applicant to perform the proposed work in accordance with plans and specifications approved under said application. 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 both. Owner Name Scott Beadle Title Head of Development & Construction Signature <u>Scott Beadle</u> Date 7/12/2022 I hereby certify that the work indicated above has been done in a manner required by the Rules and Regulations of the Department of Buildings except where reported adversely. Name: Sebastian Setteducate, P.E. Inspector's Signature: <u>[Signature]</u> Date Signed Off: 06/20/2022 Name (please print) Bruce Lilker Signature <u>[Signature]</u> Date <u>11-18-22</u>  P.E. / R.A. Seal (apply seal, then sign and date over seal)																											
INTERNAL USE ONLY																												
Examined and Recommended for Approval ☐ Yes ☐ No		Approved ☐ Yes ☐ No																										
Examiner		Borough Commissioner																										
Signature <u>[Signature]</u> Date		Signature <u>[Signature]</u>																										

John Raine, R.A.
Borough Commissioner

NOV 18 2022