



PW4: Application for Certificate of Compliance
for Equipment

Must be typewritten.

DEPT BLDGS Job No. 123765666



Scan Code ESHS5618689

1 Filing Status				
Job Number 123765666				
2 Type of Equipment Required for all applications.				
☒ Heating System (Not including boilers) ☒ Ventilation System ☒ Air Conditioning System ☐ Refrigeration				
3 Location Information Required for all applications.				
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 Required for all applications.				
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 Instructions for section (complete all).				
Item—Manufacturer/Trade Name	Floor	No. of Items	Certification Number for Listing	Capacity: BTUs/CFM
SAC-14-S/Daikin/M# SWP039HLB27DBEC6CECYYYMS	14	1	Serial # FBOU200201156	13,000 CFM
SAC-14-N/Daikin/M# SWP039HLB27DBEC6CECYYYMS	14	1	Serial # FBOU200200559	13,000 CFM
SAC-14-1/Trane/M# GEHE12041H36BOLRD111004	14	1	Serial # W20C08920	4,000 CFM
SAC-2-1/Trane/M# GEHE12041H36BOBRF0111004	1	1	Serial # W20C09848	4,000 CFM
HV-1/Trane/M# UCCAA10C0D0RC013	1	1	Serial # H2OA06841	6,000 CFM
6 Statement and Signatures Required for all applications.				
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.			Name (please print) <u>Bruce Lilker</u> Date <u>7-18-22</u>	
Owner Name <u>Scott Beadle</u> Title <u>Head of Development & Construction</u> Signature <u>Scott Beadle</u> Date <u>7/12/2022</u>			Signature <u>Bruce Lilker</u> Date	
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: <u>Sebastian Setteducate, P.E.</u> Inspector's Signature: <u>[Signature]</u> Date Signed Off: <u>06/20/2022</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		Signature <u>[Signature]</u>		
Date		Date <u>NOV 18 2022</u>		

John Raine, R.A.
Borough Commissioner

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