



PW1A: Schedule A - Occupancy / Use

Must be typewritten.

Sheet 1 of 3



Floor	Existing Legal Use						Proposed Use * Must use 2014 occupancy classification codes					
	Maximum Number of Persons	Live Load (psf)	2014 Code Designations?	Building Code Occupancy Group(s)	Dwelling/ Rooming Units (BC)	Zoning Use Group(s)	Maximum Number of Persons	Live Load (psf)	2014 Code Designations only	Building Code Occupancy Group(s)*	Dwelling/ Rooming Units (BC)	Zoning Use Group(s)
CEL CEL		OG	☐ Yes ☒ No	K		2B	9	OG	☒ Yes	S-2, U		4C
	Description BOILER ROOM, STORAGE, METER ROOM, RECREATION ROOM. ACCESSORY TO APARTMENT ABOVE. NO SLEEPING						Description ACCESSORY STORAGE SPACE FOR COMMUNITY FACILITY (AMBULATORY DIAGNOSTICS - MEDICAL OFFICE) USE GROUP 4C ON BAS FLOOR.					
BAS BAS		40	☐ Yes ☒ No	RES	1	2A	13	40	☒ Yes	B		4A
	Description APARTMENT						Description COMMUNITY FACILITY (AMBULATORY DIAGNOSTICS - MEDICAL OFFICE) USE GROUP 4A.					
001 001		40	☐ Yes ☒ No	RES	2	2A		40	☒ Yes	R-2	2	2A
	Description APARTMENTS ON EACH FLOOR						Description APARTMENTS ON EACH FLOOR					
002 002		40	☐ Yes ☒ No	RES	2	2A		40	☒ Yes	R-2	2	2A
	Description APARTMENTS ON EACH FLOOR						Description APARTMENTS ON EACH FLOOR					
003 003		40	☐ Yes ☒ No	RES	1.5	2A		40	☒ Yes	R-2		
	Description CLASS "A" APARTMENTS						Description CLASS "A" APARTMENTS					

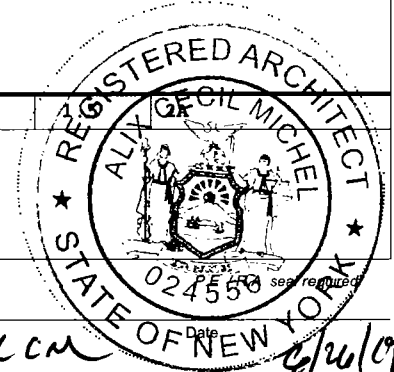
Falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. It is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. Violation is punishable by imprisonment or fine or both. I hereby state all the above information is complete and correct to the best of my knowledge.

Applicant's Name (please print)

ALIX C MICHEL

Signature

Alix CM



12/14

DOB Reference Number: T00002181276-000058

User Ref ID: 003321

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Sheet 2 of 3

☒ Orient and affix BIS
job number label here ☒

Floor	Existing Legal Use						Proposed Use * Must use 2014 occupancy classification codes					
	Maximum Number of Persons	Live Load (psf)	2014 Code Designations?	Building Code Occupancy Group(s)	Dwelling/ Rooming Units (BC)	Zoning Use Group(s)	Maximum Number of Persons	Live Load (psf)	2014 Code Designations only	Building Code Occupancy Group(s)*	Dwelling/ Rooming Units (BC)	Zoning Use Group(s)
PEN PEN		40	☐ Yes ☒ No	RES	1.5	2A		40	☒ Yes	R-2	1.5	2A
	Description CLASS "A" APARTMENTS						Description CLASS "A" APARTMENTS					
			☐ Yes ☐ No						☒ Yes			
	Description						Description					
			☐ Yes ☐ No						☒ Yes			
	Description						Description					
			☐ Yes ☐ No						☒ Yes			
	Description						Description					
			☐ Yes ☐ No						☒ Yes			
	Description						Description					



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Applicant's Name (please print)

ALIX C MICHEL

Signature

Aux C Date **6/26/19**

2 Building Notes to appear on the Certificate of Occupancy

COMMUNITY FACILITY (AMBULATORY DIAGNOSTICS - MEDICAL OFFICE) USE GROUP 4A AND SIX (6) DWELLING UNITS.

3 Applicant's Statements and Signatures *Required for all applications.*

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Name (please print)

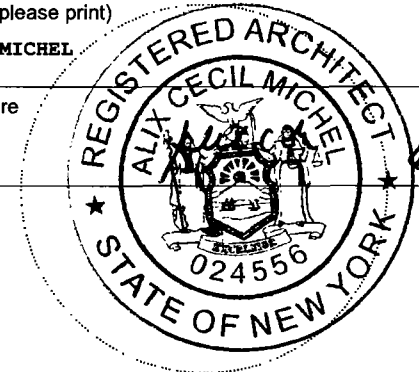
ALIX C MICHEL

Signature

Date

6/26/19

Internal Use Only



P.E. / R.A. Seal (apply seal, then sign and date over seal)