



AI1: Additional Information

Must be typewritten

DEPT BLDGS Job No. 123882110



Page number 1 of 1

BIS Document No 03

1 Location and Job Information Required for all applications

House No(s) 115

Street Name EST 111th STREET

Borough MANHATTAN

Block 1821

Lot 129

BIN 1054972

CB No 110

2 Revisions to Plans/Drawings Required whenever updating plans. All revisions for each page must be clearly described in section 3

Submission is part of a Post Approval Amendment (PAA)? ☒ Yes PW1 required ☐ No Indicate all actions for this submission.

Action	Original/ New/ Omit	Page ID	Superseding Page ID	Action	Original/ New/ Omit	Page ID	Superseding Page ID	Action	Original/ New/ Omit	Page ID	Superseding Page ID	Action	Original/ New/ Omit	Page ID	Superseding Page ID
S	DM-01.01	DM-01.02													
S	DM-02.01	DM-02.02													
S	DM-102.00	DM-102.01													

For "Action" use "N" for new page, "S" for superseding page, "O" for omitting page

Is this section continued on additional AI1 forms? Yes No

3 Additional Information Required for all applications.

REQUESTING AMENDMENT OF PREVIOUSLY APPROVED PLANS:

DM-01.02 - ADJUSTMENT OF DRAWING INDEX.

DM-02.02 - SHOWING TEMPORARY SHORING

DM-102.01 - SHOWING TEMPORARY SHORING

ACCEPTABLE FOR PERMIT
UNDER DIRECTIVE NO. 14/1978

FEB 11 2020

MARGARET LI

AMENDED
PLAN

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 understand that if I am found after hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

Name (please print)

JAKOV SARIC

Signature

Date

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