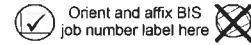




AI1: Additional Information Must be typewritten.



Page number 1 of 1

BIS Document No. 1

1 Location and Job Information Required for all applications.

House No(s) 108

Street Name EAST 38TH STREET

Borough MANHATTAN

Block 893

Lot 82

BIN 1019118

CB No. 106

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
	ssp-100.00		S	ssp-130.00	ssp130.01		ssp-170.00				
S	ssp-110.01	ssp110.02	S	ssp-140.00	ssp140.01						
S	ssp-120.01	ssp120.02	S	ssp-150.00	ssp150.01						
S	ssp-121.00	ssp121.01	S	ssp-160.00	ssp160.01						

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.

PAA THE DRAWINGS # SSP-100.00, SSP-110.02, SSP-120.02, SSP-121.01, SSP-130.01, SSP-140.01, SSP-150.01, SSP-160.01 AND SSP-170.00.

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)

QAISAR ALI KHAN

Signature

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



Date

07/17/2020