



PW7: Letter of Completion Request

(Must be typewritten)

1 LOCATION INFORMATION

House No(s) 230 Street Name Maclom X BLVD Work Proposed on Floor No(s) OSP
Borough Manhattan Block 1720 Lot 67 BIN 1053377 CB No. 110

2 REQUESTOR INFORMATION

Individuals Relationship to Job (Example: Applicant, Owner Filing Representative) Filing Representative

Last Name Carroll First Name Janell Middle Initial
Business Name Agouti Construction Consulting LLC Business Telephone 212-941-8514
Business Address 225 Broadway Business Fax
City New York State NY Zip 10007 Mobile Telephone
E-Mail janell@agouticonsulting.com License Number 001046

3 TYPE OF REQUEST

☒ Letter of Completion (Directive 14 or Non-Directive 14)

4 STATEMENTS AND SIGNATURES

By signing below, I understand that all the information provided is true to the best of my knowledge and that falsification of any statement is a misdemeanor under § 26-124 of the NYC Administrative Building Code and 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.

Requestor Signature

Date

Janell Carroll
Hold Temporary lifted

Disapproval Reasons Review request cannot be processed for the following reasons:

☐ Fees unpaid ☐ Open ECB/DOB Violation(s) ☐ Incomplete PAA ☐ Audit Conditions Pending / Job on Hold
☐ Missing inspection Sign-off(s): ☐ Construction ☐ Plumbing ☐ Electrical ☐ Other: _____
☐ Missing Required item(s): _____ ☐ TR-1 Error(s): _____
☐ Form(s) missing/incomplete: Form(s) _____ Section(s)/Reason(s) _____
☐ Other: _____