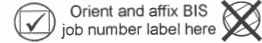




AI1: Additional Information Must be typewritten.



Page number 1 of 1 BIS Document No. _____

1 Location and Job Information Required for all applications.

House No(s) 6201 Street Name RIVERDALE AVENUE

Borough BRONX

Block 5958

Lot 1

BIN 2129304

CB No. 208

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	M201.00	M201.01									
S	M203.01	M203.02									
S	M602.01	M602.02									
S	P503.00	P503.01									

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.

We are respectfully requesting approval to the following amended plans:

M201.01 - added split system AC unit to new IT closet on 2nd floor.

M203.02 - Added split system condensing unit to serve the new split AC unit in the new IT room.
Added note regarding elevator shaft damper.

M602.02 - Added schedule information on new split system AC.

P503.01 - Revised riser diagram to indicate correct floors for equipment.

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) PATRICK F. LYNCH
Signature
Date 12/28/21
P.E. / R.A. Seal (apply seal, then sign and date over seal)

