



Buildings

OP-98 Notice/Results—Self-Certification of Plumbing, Sprinkler, Standpipe Inspection(s) & Test(s)

A copy of this completed notice must be retained for re-submission with results.



1 Permit No. 220092799		Document No.		Permit Type (check one only): ☒ PL ☐ SP ☐ SD ☐ LAA	
Borough Bronx		Block 3130 Lot 0020 House No 999		Street Name East Tremont Ave	
2 Permit Applicant E-Mail: email@neptunemechanical.com Business Phone (718) 886-5059 Fax No. (718) 886-3929					
Last Name Notias		First Name Nicholas		M.I. M Business Name Neptune Mechanical, Inc.	
Address 29-10 120th Street		City Flushing		State NY ZIP 11354 License No. 1941 ☒ LMP ☐ LFSC	
3 Inspection Data Inspection/test scheduled for: 9/21/12 (mmddyy) Time: ☐ 8:00am ☐ 8:30 ☐ 9:00 ☐ 9:30 ☐ 10:00 ☐ 10:30 ☐ 11:00 ☐ 11:30 ☒ 12:30pm					
Apts and Floors: Cellar ☐ 1:00pm ☐ 1:30 ☐ 2:00 ☐ 2:30 ☐ 3:00 Meeting Location:					

4 Notice/Result (Select one: PL, SP, SD only)																									
Systems: Plumbing (PL)						Systems: Sprinkler (SP)						Systems: Standpipe (SD)													
Inspections		Underground		Roughing		Finish		Inspections		Underground		Roughing		Finish		Inspections		Underground		Roughing		Finish			
Notice	Results	Notice	Results	Notice	Results	Notice	Results	Notice	Results	Notice	Results	Notice	Results	Notice	Results	Notice	Results	Notice	Results	Notice	Results	Notice	Results		
	Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail
Sprinkler - PL	☐	☐	☐	☐	☐	☐	☐	Sprinkler - SP	☐	☐	☐	☐	☐	☐	☐	Fire Standpipe - SD	☐	☐	☐	☐	☐	☐	☐	☐	☐
Water/Sanitary - PL	☐	☐	☐	☐	☐	☐	☐		☐	☐	☐	☐	☐	☐	☐		☐	☐	☐	☐	☐	☐	☐	☐	☐
Storm - PL	☐	☐	☐	☐	☐	☐	☐		☐	☐	☐	☐	☐	☐	☐		☐	☐	☐	☐	☐	☐	☐	☐	☐
Gas - PL	☐	☐	☐	☐	☐	☒	☐		☐	☐	☐	☐	☐	☐	☐	Alarm Sys 64/09	☐	☐	☐	☐	☐	☐	☐	☐	☐
Medical Gas - PL	☐	☐	☐	☐	☐	☐	☐		☐	☐	☐	☐	☐	☐	☐		☐	☐	☐	☐	☐	☐	☐	☐	☐
Tests	Notice	Results					Tests	Notice	Results					Tests	Notice	Results									
		Pass Fail							Pass Fail							Pass Fail									
Hydrostatic - PL	☐	☐	☐					Hydrostatic - SP	☐	☐	☐					Hydrostatic - SD	☐	☐	☐						
Water - Sanitary	☐	☐	☐					Dry Pipe Valve	☐	☐	☐					Fire Pump	☐	☐	☐						
Pressure - Water	☐	☐	☐					Booster Pump	☐	☐	☐						☐	☐	☐						
Water Storm	☐	☐	☐						☐	☐	☐					Hydrostatic 63/09	☐	☐	☐						
Gas	☐	☐	☐	Gas Tested at psi					☐	☐	☐						☐	☐	☐	75 Ft 100 Ft					
Medical Gas	☐	☐	☐	☐ 3 psi ☐ 50 psi					☐	☐	☐						☐	☐	☐						
			☐ 90 psi ☐ 100 psi																						

Additional Information/Comments: Amended Sch B to show 1 meter & 1 riser for heat only. No hot water heater Tank-less coil provided.

☐ Submitted with minor variations, described here: BO-12 Previously submitted. Sch. B to be amended to show Tank-less Coil.

☐ Legalization ☐ Gas to Gas Appliance Direct Replacement ☐ Remove/Cap ☐ Detention ☐ Drywell/Retention

5 Gas Meters/Risers Data (Check all applicable to this inspection. Include gas usages for each listed meter(s)/riser(s)) ☒ Gas requested for listed meters and risers

No. of Meters: 1 Location(s) (Floor/Apt.): Cellar No. of Risers: 1 Location(s) (Floor/Apt.): Cellar ☒ Welded Gas Piping

Gas usage: ☒ Heat ☐ Boiler Pilot for oil burner ☐ Water Heater ☐ Dryer

☐ Cooking ☒ Tankless Coil ☐ HVAC ☐ Fire Place ☐ Other (describe):

6 Certifying Applicant E-Mail: email@neptunemechanical.com Business Phone (718) 886-5059 Fax No. (718) 886-3929

Last Name Notias First Name Nicholas M.I. M Business Name Neptune Mechanical, Inc.

Address 29-10 120th Street City Flushing State NY ZIP 11354 License No. 1941 ☒ LMP ☐ LFSC ☐ P.E. ☐ R.A.

7 Applicant Statements and Signatures ☒ All Comments resolved, review for sign-off ☒ All required back-up documents attached

I certify the statements herein are correct and comply with the NYC Building code. I meet the requirements of the NYC Building code as they relate to the experience requirements set forth for gas tests. I realize falsification of any statement is a misdemeanor under §28-211.1 of the Administrative code punishable by a fine or imprisonment or both and may result in removal from participation in the self-certification program and/or disciplinary action by the Licensed Master Plumber or Licensed Fire Suppression Piping Contractor License Board.

Print Name of Certifying Applicant Nick Notias	SEAL	Print Name of Permit Applicant or Alternative licensee from same firm (LMP/LFSC) Nick Notias	SEAL
Signature		Signature	
Date 09-26-2012		Date 09-26-2012	

Reviewed by: [Signature], Date: 10/1, Entered by: [Signature], R.S.O. by: [Signature], S/O by: [Signature]