



PW7: Certificate of Occupancy /
Letter of Completion Folder
Review Request
Must be typewritten



1	Location Information	APR 07 2016	Denied
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House No(s) 264	Street Name CYPRESS AVE.	Work Proposed on Floor No(s)
Borough BRONX	Block 2567 Lot 8	BIN 2003808 CB No. 201

2	Requestor Information
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Individuals Relationship to Job (example: applicant, owner filing representative)

Last Name PAZ	First Name HERBERT	Middle Initial
Business Name MICHAEL ANGELONE P.E		Business Telephone (516) 922-2024
Business Address 4 POND PL		Business Fax
City OYSTER BAY	State NY	Zip 11771
Mobile Telephone (917) 776-7472		License Number
E-Mail HHPAZ@MSN.COM		

3	Type of Request <i>Choose one</i>
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- ☒ Letter of Completion (Directive 14 or Non-Directive 14)
- ☐ TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office may be required. All requirements must be fulfilled before a TCO will be issued) 3A
- ☐ Renewal of TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office approval may be required. All requirements must be fulfilled before a TCO will be issued) 3A
- ☐ Final Certificate of Occupancy 3A
- 3A ☐ Change of address, block/lot, metes and bounds only (28-118.16.2)

4	Comments <i>If additional space is required, write "see A1-1" here and submit a completed A1-1 form with this request</i>
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REQUEST SIGN OFF TO OBTAIN REQUIERE EUP (SELF CERT0

5	Statements and Signatures
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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 § 28-124 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 3/11/16

Borough Commissioner's Office TCO Authorization <i>Do not write in this section.</i>	
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Comments:

NYC DEPT OF BUILDINGS

APR 07 2016

Authorized Name (please print)

☐ Approved

☐ Disapproved

Authorization Signature (if approved only)

Date

Disapproval Reasons <i>Review request cannot be processed for the following reasons:</i>	
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- | | | | |
|---|--|---|---|
| ☐ Fees unpaid | ☐ Open ECB/DOB Violation(s) | ☐ Incomplete PAA | ☐ Audit Conditions Pending / Job on Hold |
| ☐ Missing inspection Sign-off(s): | ☐ Construction | ☐ Plumbing | ☐ Electrical |
| ☐ Missing Required item(s): | ☐ TR-1 Error(s): | ☐ Other: _____ | |
| ☐ Form(s) missing/incomplete: Form(s) | Section(s)/Reason(s) | | |
| ☐ Other: In PW4 + EUP Card capacity not matching | | | |