



**PW7: Certificate of Occupancy /
Letter of Completion Folder
Review Request**

Must be typewritten

DEPT BLDGS Job No. 220675758



Scan Code ESHS1974339

1	Location Information				
House No(s) 2050		Street Name Bartow Avenue		Work Proposed on Floor No(s) 001 to 007, Rof	
Borough Bronx		Block 5141	Lot 1085	BIN 2099307	CB No. 210

2	Requestor Information				
Individuals Relationship to Job (example: applicant, owner filing representative)					
Last Name Hadjari/ Redwood		First Name Arteneida/ Marshalin		Middle Initial	
Business Name High Rise Fire & Security				Business Telephone (718) 369-3434	
Business Address 144 21st Street				Business Fax (718) 369-0375	
City Brooklyn		State NY	Zip 11232	Mobile Telephone	
E-Mail AHadjari/MRedwood@Highrisefire.com				License Number	

3	Type of Request Choose one.				
☒ 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>				

5	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 § 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 _____					

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