



AI1: Additional Information Must be typewritten.

☒ Orient and affix BIS job number label here ☒

Page number _____ of _____ BIS Document No. _____

1 Location and Job Information Required for all applications.

House No(s) 514 Street Name Prentiss Ave X00355114

Borough Bronx Block 5515 Lot 104 BIN 2078764 CB No. 210

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

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.

THE WORK PROPOSED IN THIS APPLICATION IS NOT INCLUDED IN A SUBSTANTIAL IMPROVEMENT AS DEFINED BY SECTION BC G201.2 AND 1 RCNY 3606-01
THE WORK PROPOSED IN THIS APPLICATION IS A REPLACEMENT OF THE LEANING AND WRONGLY PLACED ON THE OTHER PROPERTY GRADE SEPARATION WALL.

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 (Last, first, middle initial)
Chris S. C. Yiu 7.23.20
Signature Date

P.E. / R.A. Seal (apply seal, P.E. or R.A. and date over seal)

