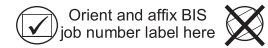




300798448

## PW1: Plan/Work Application

Application must be typewritten



### 1 LOCATION INFORMATION (required for all applications)

House No(s) 1347 Street Name 38 STREET

Borough BROOKLYN Block 5300 Lot 55 BIN 3253176 CB No. 312

Work on Floor(s) C, 1, MEZ Apt./Condo No(s)

### 2 APPLICANT INFORMATION (required for all applications; fax, mobile phone and email address are optional information)

Last Name GEE First Name PETER Middle Initial

Business Name GEE2000 ARCHITECT P.C. Business Telephone 917-682-2923

Business Address 111 70 STREET Business Fax

City BROOKLYN State NY Zip 11215 Mobile Telephone 917-682-2923

Email gee2000architect@gmail.com License Number 021890

Choose one: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ R.L.A. ☐ Other:

### 3 FILING REPRESENTATIVE (complete only if different from applicant specified in Section 2; fax, mobile phone, and email are optional info)

Last Name GELLER First Name BENZION Middle Initial

Business Name BMG Expediting Group USA Business Telephone 917-261-1695

Business Address 1607 45 STREET Business Fax

City BROOKLYN State NY Zip 11204 Mobile Telephone

Email bmggroupusa@gmail.com Registration Number 7633

### 4 FILING STATUS (required for all applications; choose one and provide specified associated information)

☐ Initial Filing 5, 7, 11, 12A, 25-26

Choose one only:

☐ Standard Plan Examination or Review☐ Professional Certification PC1, POC1☐ Professional Certification of Objections A11☐ Prior to Approval Actions 25-26☐ Amend Existing Filing 4A☐ Subsequent Filing 6-7, 8A (Alt-2 only), 11☒ Post Approval Amendment (PAA) 4A, 6, 24-25Will PAA affect filing fees? ☐ YES ☒ NO☒ New (Superseding) Applicant 4A, 25-26☐ Reinstatement 24-26☐ Withdrawal 26☐ Specified in 4A and 6☐ Entire Job

4A Indicate existing document number affected by filing:

01

### 5 JOB/PROJECT TYPES (choose one and provide specified associated information)

☐ Alteration Type 1 or Alteration Type 1 required to meet New Building requirements (28-101.4.5) 6A-E, 8B-C, 8F, 9-10, 12, 13C-F, 14, 18-20, 22 & PW1A, PD1☐ Alteration Type 1, OT: 'No Work' 8C, 8F, 9-10 & 12, 13C-F, 14, 18-19, 22, PW1A, PD1☐ Alteration Type 2 5A, 6A-D, 8A-B, 9-10, 13C-E, 14, 20, 22☐ Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 20, 22☐ New Building 6A-E, 8F, 9A, 9C-K, 9M, 10, 12 & 13A-E, 14, 18-20, PW1A, PD1☐ Sign 5A, 6B-D, 9A, 9D, 22-23☐ Full Demolition 6B, 8D, 9A & 9C-D, 9K, 9M, 13D-E, 14, 21A, 22☐ Subdivision 9A, 9D, 12A-B☐ Condominium ☐ Improved 17

5A Directive 14 acceptance requested?

☐ YES ☐ NO

### 6 WORK TYPES (select all that apply but no more than allowed by job & filing type: 'OT' required on all NB and Alteration 1 initial applications)

6A ☐ BL - Boiler PW1C☐ FA - Fire Alarm☐ FB - Fuel Burning PW1C☐ FS - Fuel Storage PW1C☐ FP - Fire Suppression☐ MH - Mechanical☒ PL - Plumbing PW1B☐ SD - Standpipe PW1B☐ SP - Sprinkler PW1B6E ☐ CC - Curb Cut 16☐ OT/LAN - Landscape6F ☐ OT/ANT - Antenna☐ OT/BPP - Builders Pavement Plan 8D☐ OT/FPP - Fire Protection Plan☐ OT/MAR - Marquee 8E, 26B6B ☐ EQ - Construction☐ Equipment 156C ☒ OT/GC - General☐ Construction6D ☐ OT - Other, describe:

**7 PLANS/CONSTRUCTION DOCUMENTS SUBMITTED** (plans are required for most applications)

Are plans being submitted with this PW1? ☐ YES ☐ NO If YES, do the plans include: ☐ FO - Foundation ☐ EN - Energy Analysis

**8 ADDITIONAL INFORMATION**

|           |    |      |    |      |    |      |           |                                                                                                                                                                                                                                                                  |           |                                              |
|-----------|----|------|----|------|----|------|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------|
| <b>8A</b> | WT | Cost | WT | Cost | WT | Cost | <b>8B</b> | Is a building enlargement proposed?<br><input type="checkbox"/> NO enlargement is proposed<br><input type="checkbox"/> YES 12, PD1<br><input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical<br>Additional Construction Floor Area: _____ sq. ft. | <b>8C</b> | Estimated Job Cost \$                        |
|           |    |      |    |      |    |      |           |                                                                                                                                                                                                                                                                  | <b>8D</b> | Street Frontage: _____ linear ft.            |
|           |    |      |    |      |    |      |           |                                                                                                                                                                                                                                                                  | <b>8E</b> | Height: _____ ft. Width: _____ ft.           |
|           |    |      |    |      |    |      |           |                                                                                                                                                                                                                                                                  | <b>8F</b> | Total Building Square Footage: _____ sq. ft. |

**9 ADDITIONAL CONSIDERATIONS, LIMITATIONS OR RESTRICTIONS**

**9A** Review is requested under which Building Code? ☐ 2022 ☐ 2014 ☐ 2008 ☐ 1968 ☐ Prior to 1968

|           |                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                          |                                                                                                                                                                                                                                                                                                                                                                                                      |
|-----------|----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>9B</b> | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> Alteration required to meet New Building requirements (28-101.4.5) <i>If yes, 13A-B</i><br><br><input type="checkbox"/> Alteration is a major change to exits                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> Change in number of dwelling units<br><input type="checkbox"/> Change in Occupancy/Use<br><input type="checkbox"/> Change is inconsistent with current Certificate of Occupancy<br><input type="checkbox"/> Change in number of stories                                                                                                                                     |
| <b>9C</b> | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> Façade Alteration<br><input type="checkbox"/> Adult Establishment <i>If YES, plot diagram (except DM)</i><br><input type="checkbox"/> Compensated Development (Inclusionary Housing)<br><input type="checkbox"/> Low Income Housing (Inclusionary Housing)<br><input type="checkbox"/> Single Room Occupancy (SRO) Multiple Dwelling<br><input type="checkbox"/> Filing includes Lot Merger/Reapportionment <i>If YES, 17</i>                                                          | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> Infill Zoning<br><input type="checkbox"/> Loft Board YES NO Work Includes:<br><input type="checkbox"/> Quality Housing <input type="checkbox"/> Prefab wood I-joists<br><input type="checkbox"/> Site Safety Job/Project <input type="checkbox"/> Structural cold-formed steel<br><input type="checkbox"/> Included in LMCCC <input type="checkbox"/> Open-web steel joists |
| <b>9D</b> | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> Landmark<br><input type="checkbox"/> Little 'E' or RD Site<br><input type="checkbox"/> Unmapped/CCO Street<br><input type="checkbox"/> Requesting legalization of work where no work without a permit violations have been issued<br><input type="checkbox"/> Other (please specify on line provided below): _____<br><input type="checkbox"/> CRFN(s) Restrictive Declaration/Easement (max. 4): _____<br><input type="checkbox"/> CRFN(s) Zoning Exhibit (I, II, III, etc. - max. 4) | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> Filing to address violations (list #s—max. 5): _____<br><br><input type="checkbox"/> Filing to comply with Local Laws (list #s—max. 2)                                                                                                                                                                                                                                      |

**9E** ☐ BSA Calendar Numbers (max. 5):

**9F** ☐ CPC Calendar Numbers (max. 5):

**9G** ☐ Work includes lighting fixture and/or controls, installation or replacement. [ECC §404 and §505]

|                                                                                                                                                                                    |                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| <b>9H</b> <input type="checkbox"/> Work includes modular construction under NYS jurisdiction<br><input type="checkbox"/> Work includes modular construction under NYC jurisdiction | <b>9I</b> High Rise Team tracking #: |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|

**9J** ☐ Structural peer review required per BC 16. *If YES, provide NYS P.E. license number:*

**9K** ☐ Work includes permanent removal of standpipe, sprinkler or fire suppression related systems

**9L** ☐ Work includes partial demolition as defined in AC §28-101.5, or the raising/moving of a building. *If YES, 21B*  
☐ Structural stability affected by proposed work

**9M** ☐ Work involves or will result in:  
1) an amount of soil disturbance greater than or equal to 20,000 square feet; or  
2) the creation of 5,000 square feet or more of impervious surface.  
  
☐ Work is part of a larger common plan or development or sale that involves or will result in:  
1) an amount of soil disturbance greater than or equal to 20,000 square feet; or  
2) the creation of 5,000 square feet or more of impervious surface.

## 10 NYCECC COMPLIANCE (New York City Energy Conservation Code)

- ☐ To the best of my knowledge, belief and professional judgment, all work under this application is in compliance with the NYCECC\*  
Code Compliance Path (choose **one**): ☐ NYCECC ☐ ASHRAE  
Energy Analysis (choose **one**): ☐ Tabular Analysis ☐ REScheck ☐ COMcheck ☐ Energy Modeling (EN1)
- ☐ To the best of my knowledge, belief and professional judgment, all work under this application is exempt from the NYCECC\* in accordance with one of the following (choose **one**):  
☐ The work is an alteration of a State or National historic building.  
☐ The scope of the work is entirely in a "low-energy building" and is limited to the building envelope.  
☐ The entire scope of work involves a temporary structure and/or one or more of the following work types: FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt.  
☐ This is a post-approval amendment and exempt under a prior edition of the Energy Code. See statement of exemption on attached drawings.

## 11 JOB DESCRIPTION

## 11A RELATED DOB JOB NUMBERS

**11B** Primary application Job No.

## 12 ZONING CHARACTERISTICS

|                        |  |  |  |                                                                                 |  |  |  |
|------------------------|--|--|--|---------------------------------------------------------------------------------|--|--|--|
| <b>12A</b> District(s) |  |  |  | <b>12B</b> Street legal width: _____ ft.                                        |  |  |  |
| Overlay(s)             |  |  |  | Street Status: <input type="checkbox"/> Public <input type="checkbox"/> Private |  |  |  |
| Special Dist.(s)       |  |  |  | If the zoning lot includes multiple tax lots, list all tax lots here ►          |  |  |  |
| Map Number             |  |  |  |                                                                                 |  |  |  |

|                           |                   |          |     |                                                                                                              |                                |
|---------------------------|-------------------|----------|-----|--------------------------------------------------------------------------------------------------------------|--------------------------------|
| <b>12C</b> Proposed: Use* | Zoning Floor Area | District | FAR | Proposed Lot Details:                                                                                        | Proposed Yard Details:         |
|                           | sq. ft.           |          |     | Lot Type: <input type="checkbox"/> Corner <input type="checkbox"/> Interior <input type="checkbox"/> Through | Check here if no yards: or     |
|                           | sq. ft.           |          |     | Lot Coverage _____ %                                                                                         | Front Yard _____ ft.           |
|                           | sq. ft.           |          |     | Lot Area _____ sq. ft.                                                                                       | Rear Yard _____ ft.            |
|                           | sq. ft.           |          |     | Lot Width _____ ft.                                                                                          | Rear Yard Equivalent _____ ft. |
|                           | sq. ft.           |          |     | Proposed Other Details:                                                                                      | Side Yard 1 _____ ft.          |
|                           | sq. ft.           |          |     | Enclosed Parking? <input type="checkbox"/> YES <input type="checkbox"/> NO                                   | Side Yard 2 _____ ft.          |
| <b>Proposed Totals</b>    | sq. ft.           |          |     | If YES, # of parking spaces: _____                                                                           |                                |
| <b>Existing Total</b>     | sq. ft.           |          |     | Perimeter Wall Height _____ ft.                                                                              |                                |

\*Use can be one of the following: residential, commercial, manufacturing, or community facility. List only **one** use per line.

## 13 BUILDING CHARACTERISTICS \*Main use/dominant occupancy per AC §28-101.5 \*\*Use 2022 Code equivalents †Residential w/other use

**13A** Primary structural system, choose **one**: ☐ Masonry ☐ Concrete (CIP) ☐ Concrete (Precast)  
☐ Wood ☐ Steel (Structural) ☐ Steel (Cold-Formed) ☐ Steel (Encased in Concrete)

|                                      |                                                          |                                                          |                                                                                                     |
|--------------------------------------|----------------------------------------------------------|----------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| <b>13B</b>                           | Existing                                                 | Proposed                                                 | <b>13D</b> Building Type: <input type="checkbox"/> 1, 2, or 3 Family <input type="checkbox"/> Other |
| Structural Occupancy/Risk Cat.       |                                                          | 2022 Code Designations?                                  | Mixed-use building?† <input type="checkbox"/> YES <input type="checkbox"/> NO                       |
| Seismic Design Cat.                  |                                                          | 2022 Code Designations?                                  |                                                                                                     |
| <b>13C</b> Occupancy Classification* | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input checked="" type="checkbox"/> YES**                | <b>13E</b>                                                                                          |
| Construction Classification          | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO | Existing                                                                                            |
| Multiple Dwelling Classification     |                                                          |                                                          | Proposed                                                                                            |
|                                      |                                                          |                                                          | Building Height _____ ft.                                                                           |
|                                      |                                                          |                                                          | Building Stories _____                                                                              |
|                                      |                                                          |                                                          | Dwelling Units _____                                                                                |

**13F** Building was originally erected pursuant to which Building Code: ☐ 2022 ☐ 2014 ☐ 2008 ☐ 1968 ☐ Prior to 1968  
The earliest Code with which this building or any part of it is required to comply: ☐ 2022 ☐ 2014 ☐ 2008 ☐ 1968 ☐ Prior to 1968

## 14 FILL (choose one)

- ☐ Not Applicable ☐ On-Site ☐ Off-Site ☐ Under 300 cubic yards

## 15 CONSTRUCTION EQUIPMENT

- ☐ Chute ☐ Sidewalk Shed ☐ Construction Material: \_\_\_\_\_  
☐ Fence Size: \_\_\_\_\_ linear ft. ☐ BSA/MEA Approval No. \_\_\_\_\_  
☐ Supported Scaffold ☐ Other: \_\_\_\_\_

## 16 CURB CUT DESCRIPTION

Size of cut (with splays): \_\_\_\_\_ ft.  
Distance to nearest corner: \_\_\_\_\_ ft.  
to street: \_\_\_\_\_

## 17 TAX LOT CHARACTERISTICS

Original tax lots being merged or reapportioned (if applicable):

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

Tentative tax lot numbers (new tax lots only):

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

## 18 FIRE PROTECTION EQUIPMENT

|                  | Existing                 |                          | Proposed                 |                          |
|------------------|--------------------------|--------------------------|--------------------------|--------------------------|
|                  | YES                      | NO                       | YES                      | NO                       |
| Fire Alarm       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fire Suppression | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sprinkler        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Standpipe        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## 19 OPEN SPACES

|                | Existing | Proposed |                | Existing | Proposed |
|----------------|----------|----------|----------------|----------|----------|
| Plaza Area     | sq. ft.  | sq. ft.  | Arcade Area    | sq. ft.  | sq. ft.  |
| Parking Area   | sq. ft.  | sq. ft.  | Parking Spaces |          |          |
| Loading Berths | sq. ft.  | sq. ft.  | Loading Berths |          |          |

## 20 SITE CHARACTERISTICS

|                                                                               |                                                                                        |
|-------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| YES NO                                                                        | YES NO                                                                                 |
| <input type="checkbox"/> <input type="checkbox"/> Tidal Wetlands              | <input type="checkbox"/> <input type="checkbox"/> Freshwater Wetlands                  |
| <input type="checkbox"/> <input type="checkbox"/> Coastal Erosion Hazard Area | <input type="checkbox"/> <input type="checkbox"/> Urban Renewal                        |
| <input type="checkbox"/> <input type="checkbox"/> Fire District               | <input type="checkbox"/> <input type="checkbox"/> Flood Hazard Area <i>If yes, 20A</i> |

## 20A FLOOD HAZARD AREA INFORMATION

|                                                                                       |
|---------------------------------------------------------------------------------------|
| YES NO                                                                                |
| <input type="checkbox"/> <input type="checkbox"/> Substantial improvement?            |
| <input type="checkbox"/> <input type="checkbox"/> Substantially damaged?              |
| <input type="checkbox"/> <input type="checkbox"/> Floodshields part of proposed work? |

## 21 DEMOLITION DETAILS *\*Mechanical equipment other than handheld devices to be used for demolition or removal of debris (BC §3306.4).*

|                                                                                                                                                     |                                                                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| YES NO                                                                                                                                              |                                                                                         |
| 21A <input type="checkbox"/> <input type="checkbox"/> Demo. filing is for a secondary structure? <i>If YES, specify structure being demolished:</i> |                                                                                         |
| <input type="checkbox"/> <input type="checkbox"/> Mechanical means* from out of building? <i>If YES, mechanical means will demolish:</i>            | <input type="checkbox"/> entire structure or <input type="checkbox"/> part of structure |
| <input type="checkbox"/> <input type="checkbox"/> Mechanical means* from within building? <i>If YES, describe equipment proposed:</i>               |                                                                                         |
| 21B <input type="checkbox"/> <input type="checkbox"/> Demolition work affects the exterior building envelope                                        |                                                                                         |
| <input type="checkbox"/> <input type="checkbox"/> The scope of work involves raising/moving of a building                                           |                                                                                         |

## 22 ASBESTOS ABATEMENT COMPLIANCE (choose one)

☐ The scope of work requires related asbestos abatement as defined in NYC Department of Environmental Protection (DEP) regulations.

☐ The scope of the work is **not** an asbestos project as defined in the regulations of the NYC DEP. *DEP Control # is required.*  
DEP ACP-5 Control No. \_\_\_\_\_

☐ The scope of work is exempt from the asbestos requirement as defined in the regulations promulgated by the NYC DEP (15 RCNY 1-23(b)) or is an alteration to a building constructed pursuant to plans submitted for approval on or after April 1, 1987, in accordance with § 28-106.1.

## 23 SIGN

|                                                                                                                                                    |                                          |                                  |                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Purpose:                                                                                                                                           | Type:                                    | Estimated Cost: \$               | 23A Illuminated type: <input type="checkbox"/> Direct <input type="checkbox"/> Flashing <input type="checkbox"/> Indirect                                |
| <input type="checkbox"/> Advertising                                                                                                               | <input type="checkbox"/> Illuminated 23A | Total Square Feet: _____         | YES NO                                                                                                                                                   |
| <input type="checkbox"/> Non-Advertising                                                                                                           | <input type="checkbox"/> Non-Illuminated | Height above Curb: _____ ft. in. | <input type="checkbox"/> <input type="checkbox"/> If sign projects beyond building line, is owner billed for annual permit? <i>If no, specify in 26B</i> |
| Location: <input type="checkbox"/> Ground <input type="checkbox"/> Roof 23B <input type="checkbox"/> Wall                                          | Height above Roof: _____ ft. in.         |                                  | 23B <input type="checkbox"/> <input type="checkbox"/> Is roof sign tight, closed or solid?                                                               |
| YES NO                                                                                                                                             |                                          |                                  | 23C Sign wording. <i>If extensive, provide only key wording.</i>                                                                                         |
| <input type="checkbox"/> <input type="checkbox"/> Is sign inside building line? <i>If 'NO', sign projects by:</i> _____ ft. in.                    |                                          |                                  |                                                                                                                                                          |
| <input type="checkbox"/> <input type="checkbox"/> Designed for changeable copy? <i>If no, 23C</i>                                                  |                                          |                                  |                                                                                                                                                          |
| <input type="checkbox"/> <input type="checkbox"/> Does an OAC have an interest in this sign or location? <i>If yes, 23G</i>                        |                                          |                                  |                                                                                                                                                          |
| <input type="checkbox"/> <input type="checkbox"/> Within 900' and within view of an arterial highway? <i>If yes, 23D</i>                           |                                          |                                  | 23D Distance from Arterial Highway: _____ ft.                                                                                                            |
| <input type="checkbox"/> <input type="checkbox"/> Within 200' and within view of a park ½ acre or more? <i>If yes, 23E</i>                         |                                          |                                  | 23E Distance from Park ½ acre or more: _____ ft.                                                                                                         |
| <p><i>If answer is 'YES' to either of the above two questions and this is an advertising sign, OAC sign number is required in Section 23F.</i></p> |                                          |                                  | 23F OAC Sign Number: _____                                                                                                                               |
|                                                                                                                                                    |                                          |                                  | 23G OAC Registration Number: _____                                                                                                                       |

## 24 COMMENTS (place additional comments on an AI-1 form; see Guide for proper incorporation of professional certification statements)

Through this post approval amendment, I supersede applicant EFRAIM GOLDSTEIN and assume full responsibility as applicant of record for application number 300798448.

I am submitting new plans/documents under my seal, and all are in compliance with the current version of Building Code, Zoning Regulations and City Laws and Rules.

**25 APPLICANT'S STATEMENTS & SIGNATURES** (required for all applications)

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. I prepared or supervised the preparation of the construction documents and applications herewith submitted and to the best of my knowledge and belief, the construction documents and work shown thereon comply with the provisions of the NYC Administrative Code and other applicable laws and rules. ☐ (check here if) except as set forth in the accompanying documents, I acknowledge that I have read and complied with all instructions pertaining to this application and supplementary schedules submitted. **Cluster Development Statement** (if applicable): I hereby state that all specifications relating to this job are identical to those previously filed under the group lead job number, except as specified herein.

**For Initial New Building and Alteration 1 applications filed under the 2022 NYC Building Code only:** does this building qualify for high-rise designation? ☐ YES ☐ NO  
**Effective 14 Initial applications only:** I certify that the construction documents submitted and all construction documents related to this application do not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy. ☐ YES ☐ NO

Name (print): Peter Lee  
Sign & Date: 4.6.2025  
P.E./R.A. Seal (apply seal over signature and date over seal)

**26 PROPERTY OWNER'S STATEMENTS & SIGNATURES**

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. Furthermore, I understand that I am responsible for insuring that a final inspection be performed when the permitted work is complete, and that a satisfactory report of final inspection be submitted, along with all required submitted documents, so that the NYC Department of Buildings may issue a Letter of Completion or Certificate of Occupancy within the time prescribed by law.

I have authorized the applicant to file this application for the work specified herein and all future amendments. I will not knowingly authorize any work that is not in compliance with all applicable laws, rules, and regulations.

YES NO

- ☐ ☐ **Fee Exemption Request (Non-Profit Owned and Operated)**  
In accordance with Administrative Code §28-112.1, Exception 1, I certify that the deed holder is a corporation or association organized and operated exclusively for the purposes indicated in such section, and that the property is used exclusively by such entity for such purposes. \*
- ☐ ☐ **Fee Exemption Request (NYCHA/HHC, NYC Agency, or Other Government Owned and Operated)**  
The building or any part thereof to be constructed, renovated, altered or demolished is owned and operated exclusively for the purposes of the NYC Agency, NYC Authority, NYC Agency, Federal Government or any other government entity. \*
- ☐ ☐ **Owner's Certifications Regarding Occupied Housing**  
The building to be altered, constructed or demolished contains one or more occupied dwelling units.
- ☐ ☐ The building to be altered, constructed or demolished contains one or more dwelling units that will remain occupied during construction. These occupied dwelling units have been clearly identified on the submitted construction documents.
- ☐ ☐ The site of the building to be altered or demolished, or the site of the new building to be constructed, contains occupied housing accommodations subject to rent control or rent stabilization under Chapters 3 and 4 of Title 26 of the New York City Administrative Code. If yes, select one of the following:
- ☐ The owner is not required to notify the New York State Homes and Community Renewal (NYSHCR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to NYSHCR regulations, does not require notification.
- ☐ The owner has notified the New York State Homes and Community Renewal (NYSHCR) of its intention to file such construction documents/apply for such permit and has complied with all requirements imposed by the regulations of such agency as preconditions for such filing/application.

Provide date NYSHCR notified: \_\_\_\_\_

- ☐ ☐ **Owner's Certification for Directive 14 Applications (if applicable)**  
I have read and am fully aware of the applicant's statement that the construction documents submitted and all construction documents related to this application will not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy and the work is not inconsistent with the current certificate of occupancy. Furthermore, I understand that I am responsible for retaining a qualified design professional to perform a final inspection when the permitted work is complete and this professional must submit a satisfactory final inspection report to the NYC Department of Buildings within the time following inspection prescribed by Department rule.

Notes for Section 26A: Section required if unit owner signed Section 25. Signature required for authorized representative of Condo or Co-Op Board.

\* For fee waivers, please see the PW1 User Guide

Owner Type: ☐ Individual ☐ Partnership ☐ NYCHA/HHC  
☒ Corporation ☐ Other Government ☐ NYC Agency  
☐ Condo Unit Owner or Co-Op Tenant-shareholder 26A  
Is the deed holder a non-profit organization? ☒ YES ☐ NO

Name (please print): HENRY KASZIRER

Relationship to Owner: SEC

Business Name/Agency: CONGREGATION BEIS MEIR INC

Street Address: 1351 38 STREET

City: BROOKLYN State: NY Zip: 11218

Telephone Number: 718-437-5844 Fax: \_\_\_\_\_

Email Address: yeshivabeismeir@gmail.com

Signature & Date: [Signature] 3/6/2025

**26A CONDO/CO-OP BOARD**  
(see note in bottom left corner of page)

Name (please print): \_\_\_\_\_

Title: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Signature & Date: \_\_\_\_\_

**26B LESSEE RESPONSIBLE FOR ANNUAL SIGN OR MARQUEE PERMIT**

Name (please print): \_\_\_\_\_

Relationship to Owner: \_\_\_\_\_

Business Name/Agency: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_