



PW-1: Plan / Work Application

Must be typewritten.

DEPT. OF BLDGS.	310155140	Job Number
SC080127003		Scan Code

1 Location Information Required for all applications. BNP 08-0506

House No(s) 1122	Street Name EAST 9 STREET			
Borough BROOKLYN	Block 06534	Lot 00015	BIN 3171433	C.B. No. 312
Work on Floor(s) 001	Apt. / Condo No(s)			

2 Applicant Information Required for all applications. Business Fax, Mobile Telephone, and E-Mail are optional.

Last Name GARFINKEL	First Name LEWIS	Middle Initial E		
Business Name GARFINKEL ARCHITECTS	Business Telephone (718) 951-6551			
Business Address 2919 AVENUE J	Business Fax			
City BROOKLYN	State NY	Zip 11210	Mobile Telephone	
E-Mail	License Number 025123			
Choose one: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other, please specify:				

3 Filing Representative Complete only if different from applicant specified in section 2. Fax, Mobile Telephone, and E-Mail are optional.

Last Name SPIEGEL	First Name DANIEL	Middle Initial	
Business Name EXPEDIA BUILDING SOLUTIONS	Business Telephone (718) 825-1412		
Business Address 2919 AVENUE J	Business Fax		
City BROOKLYN	State NY	Zip 11210	Mobile Telephone
E-Mail	Registration Number S05167		

4 Filing Status Required for all applications. In this section * means required for Alteration Type 2 jobs only.

☒ Initial Filing 5, 7, 11-12, 24-25	☐ Changes Prior to Approval 23-24	☐ New Applicant 4A, 24-25
☒ Prof. Certify Job/Plans PC-1, POC-1	☐ Add Work Types 6-7, 8A*, 11	☐ Reinstatement 23-25
☐ Self Certify Objections Only AI-1	☐ Amend Existing Filing 4A	☐ Withdrawal 24-25
☐ PAA 4A, 23-24	☐ Entire Job	
PAA effect fees? ☐ Yes ☐ No	☐ Specified in 4A	

5 Job Types Select one and provide specified associated information. Alteration Types 1, 2, and 3 require sections 5B, 9A-C and 10.

☐ Alteration Type 1 13-14, 18-20, PW-1A, PD-1	☐ Alteration Type 2 5A, 6A-D, 8A-B, 13, 14 (if enl.), 20	5A Directive 14 acceptance requested? ☐ Yes ☒ No
☐ Partial Demolition	☒ Alteration Type 3 5A, 6B-F, 8C	5B ☐ Check if filing includes lot merger / reapportionment 17
☐ Room Count / Dwelling Units	☐ Demolition 6B, 8D, 9A-B, 13-14, 21	5C Total Construction Floor Area: sq. ft.
☐ Occupancy / Use	☐ New Building 5B-C, 6A-E, 8F, 9A-B, 10, 13-14, and 18-20, PW-1A, PD-1	
☐ Egress	☐ Sign 5A, 6B-D, 9A, 22	
☐ Alteration Type 1, OT: "No Work"	☐ Subdivision 5B, 9A	
↳ 5B, 8C, 9A-C, 10, 13-14, 18-19, PW-1A	☐ Condominium	
	☐ Improved 17	

6 Work Types Select all that apply but no more than allowed by job and filing type. "OT" required on all NB and Alteration 1 initial applications.

6A ☐ BL - Boiler PW-1C	☐ MH - Mechanical	6B ☐ EQ - Construction Equipment 15	6F ☐ OT/ANT - Antennae
☐ FA - Fire Alarm	☐ PL - Plumbing PW-1B	6C ☐ OT/GC - General Construction	☒ OT/BPP - Builders Pvmt. Plan 8D
☐ FB - Fuel Burning PW-1C	☐ SD - Standpipe PW-1B	6D ☐ OT - Other provide description below:	☐ OT/FPP - Fire Protection Plan
☐ FS - Fuel Storage PW-1C	☐ SP - Sprinkler PW-1B	6E ☐ CC - Curb Cut 16	☐ OT/MAR - Marquee 8E, 25B
☐ FP - Fire Suppression			

7 Plans Submitted Plans are required for most applications.

☐ NP - No Plans	or	☐ AR - Architectural	☒ BP - BPP Checklist	☐ FO - Foundation	☐ ME - Mechanical
		☐ OT - Other	☐ PL - Plumbing	☐ ST - Structural	☐ ZO - Zoning

DOB Reference Number: T00000055644-000015

User Ref ID: 07029

8 Additional Information							
8A	WT	Cost	WT	Cost	WT	Cost	
							8B Enlargement proposed? <i>If yes, PD-1</i>
							☐ No enlargement proposed
							☐ Yes: ☐ Horizontal ☐ Vertical
							Additional area: sq. ft.
							8C Estimated Job Cost \$
							8D Street Frontage: 36 linear ft.
							8E Height: ft. Width: ft.
							8F Name of cluster or development below:
							Project lead job no.

9 Additional Considerations, Limitations or Restrictions					
	Yes	No		Yes	No
9A	☐	☒	Filed to Comply with Local Law <i>If yes, 9G</i>	☐	☒
	☐	☒	Other, specify: _____	☐	☒
	☐	☒	Restrictive Declaration / Easement <i>If yes, 9D</i>	☐	☒
	☐	☒	Zoning Exhibit (I, II, III, etc.) <i>If yes, 9E</i>	☐	☒
9B	☐	☒	Adult Establishment <i>If yes, PD-1 (except DM jobs)</i>	☐	☒
	☐	☒	Compensated Development (Inclusionary Housing)	☐	☒
	☐	☒	Low Income Housing (Inclusionary Housing)	☐	☒
	☐	☒	Single Room Occupancy (SRO) Multiple Dwelling	☐	☒
9C	☐	☒	Old Code Review Requested	☐	☒
	☐	☒	Structural Stability affected by proposed work	☐	☒
9D CRFN					
9E CRFN					
9F HRT Lead No.					
9G Local Law No. Year					
9H BSA Calendar No(s)					
9I CPC Calendar No(s)					

10 ECCCNYS Compliance <i>Energy Conservation Construction Code of NYS</i>	10A Specific Reason for ECCCNYS Exemption
☐ To the best of my knowledge, belief and professional judgment, this application is in compliance with the ECCCNYS.* ☒ The work proposed in this application is exempt from the ECCCNYS because per Chapter 1 of the ECCCNYS it is:* ☒ An alteration but not a substantial alteration ☐ Work in a historic building ☐ Work in an exempt building (<i>specify category/reasons in 10A</i>)	

*I understand the Department may require supporting analyses and documentation.

11 Job Description	11A Related DOB Job Numbers
BUILDERS PAVEMENT PLAN HERewith BEING FILED FOR 36 LINEAR FEET OF STREET FRONTAGE	310069289 _____ _____ _____

12 Zoning Lot Characteristics <i>A complete set of zoning information is required for all initial applications.</i>		
District(s) R5	Map No. 22D	Zoning lot includes the following tax lots:
Overlay(s)	Street legal width: 60 ft.	
Special Dist.(s) OP	Street Status: ☒ Public ☐ Private	

13 Building Characteristics <i>*For occupancy classification, use main use or dominant occupancy per BC §27-239</i>	14 Fill																														
<table style="width:100%; border-collapse: collapse;"> <tr> <th style="width: 30%;"></th> <th style="width: 10%;">Existing</th> <th style="width: 10%;">Proposed</th> <th style="width: 30%;"></th> <th style="width: 10%;">Existing</th> <th style="width: 10%;">Proposed</th> </tr> <tr> <td>Occupancy Classification*</td> <td></td> <td></td> <td>Building Height</td> <td>ft.</td> <td>ft.</td> </tr> <tr> <td>Construction Classification</td> <td></td> <td></td> <td>Building Stories</td> <td></td> <td></td> </tr> <tr> <td>Multiple Dwelling Classification</td> <td></td> <td></td> <td>Dwelling Units</td> <td></td> <td></td> </tr> <tr> <td>Building Type: ☒ 1, 2, or 3 Family ☐ Other</td> <td></td> <td></td> <td>Zoning Floor Area</td> <td>sq. ft.</td> <td>sq. ft.</td> </tr> </table>		Existing	Proposed		Existing	Proposed	Occupancy Classification*			Building Height	ft.	ft.	Construction Classification			Building Stories			Multiple Dwelling Classification			Dwelling Units			Building Type: ☒ 1, 2, or 3 Family ☐ Other			Zoning Floor Area	sq. ft.	sq. ft.	Choose one: ☐ Not Applicable ☐ Off-Site ☐ On-Site ☐ Under 300 cu. yd.
	Existing	Proposed		Existing	Proposed																										
Occupancy Classification*			Building Height	ft.	ft.																										
Construction Classification			Building Stories																												
Multiple Dwelling Classification			Dwelling Units																												
Building Type: ☒ 1, 2, or 3 Family ☐ Other			Zoning Floor Area	sq. ft.	sq. ft.																										

15 Construction Equipment *Choose one.*

- ☐ Chute ☐ Sidewalk Shed Const. Material: _____
☐ Fence Size: _____ linear ft. BSA/MEA No. _____
☐ Supported Scaffold ☐ Other: _____

16 Curb Cut Description

Size of cut (with splays): _____ ft.
 Distance to nearest corner: _____ ft.
 on 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	☐	☐	☐	☐
Fire Suppression	☐	☐	☐	☐
Sprinkler	☐	☐	☐	☐
Standpipe	☐	☐	☐	☐

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
☐ ☐ Tidal / Fresh Water Wetlands
☐ ☐ Urban Renewal
☐ ☐ Fire District
☐ ☐ Flood Hazard Area

21 Demolition

Yes No

- ☐ ☐ Demolishing a secondary structure? *If yes, specify structure being demolished:* _____
☐ ☐ Will demolition use mechanical means? *If yes, mechanical means will demolish:* ☐ entire structure or ☐ part of structure

22 Signs

- Purpose: Type: Estimated Cost: \$ _____
☐ Advertising ☐ Illuminated 22A Total Square Feet: _____
☐ Accessory ☐ Non-Illuminated Height above Curb: _____ ft. in.
 Location: Height above Roof: _____ ft. in.
☐ Ground ☐ Roof 22B ☐ Wall
- Yes No
☐ ☐ Is sign inside building line? *If no, sign projects by:* _____ ft. in.
☐ ☐ Designed for changeable copy? *If no, 22C*
☐ ☐ Does an OAC have an interest in this sign or location? *If yes, 22G*
☐ ☐ Within 900' and within view of an arterial highway? *If yes, 22D*
☐ ☐ Within 200' and within view of a park 1/2 acre or more? *If yes, 22E*

If answer is "yes" to either of the above two questions and this is an advertising sign, OAC sign number is required in section 22F

22A Illuminated type: ☐ Direct ☐ Flashing ☐ Indirect

Yes No
☐ ☐ If sign projects beyond building line, is owner billed for annual permit? *If no, specify in 25B*

22B ☐ ☐ Is roof sign tight, closed or solid?

22C Sign wording. *If extensive, provide only key wording.*

22D Distance from Arterial Highway: _____ ft.

22E Distance from Park 1/2 acre or more: _____ ft.

22F OAC Sign Number: _____

22G OAC Registration Number: _____

23 Comments *Additional comments may be placed on an AI-1 form.*

24 Applicant's Statements and Signatures *Required for all applications.*

Falsification of any statement is a misdemeanor under § 26-124 of the NYC Administrative Code 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 prepared or supervised the preparation of the plans and specifications herewith submitted and to best of my knowledge and belief, the plans and work shown thereon comply with the provisions of the NYC Administrative Code and other applicable laws and regulations,

☐ 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)

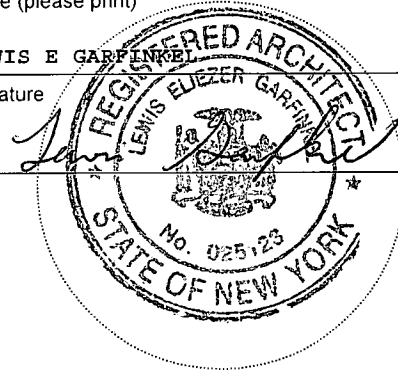
I hereby state that all specifications relating to this job are identical to those previously filed under the group lead job number, except as specified herein.

Name (please print)

LEWIS E GARFINKEL

Signature

Date



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

25 Owner's Statements and Signatures *Fax and E-Mail are optional.*

Falsification of any statement is a misdemeanor under § 26-124 of the NYC Administrative Code 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 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 the Energy Conservation Construction Code of NYS (ECCCNYS).

Yes No

- ☐ ☒ **Energy Conservation Construction Code of NYS**
Does the proposed work constitute a replacement of 50% or more of a system or subsystem at this location in any consecutive 12 month period?

- ☐ ☒ **Fee Deferred Request Statement**
I hereby request a fee deferral for the work proposed on this application and understand that **all fees must be paid before issuance of any Certificate of Occupancy or job sign off.**

- ☐ ☒ **Fee Exemption Request Statement**
In accordance with § 26-210 of the NYC Administrative Code I hereby state that the proposed work involves a building or property used exclusively for the purposes indicated in such section.

- ☐ ☒ **Owner's Certification Regarding Occupied Housing**
The building to be altered, or the site of the new building, or the dwelling to be demolished or removed, as the case may be, contains occupied housing accommodations subject to rent control under Chapter 3 of Title 26 of the NYC Administrative Code.

- ☐ ☒ The owner has notified the Division of Housing and Community Renewal (DHCR) of his intention to file such plans/apply for such permit and has complied with all requirements imposed by the regulations of such agency as preconditions for such [filing/application].

► If yes, provide date DHCR notified: _____

- ☐ ☒ **Owner's Certification for Adult Establishments**
I authorize and intend to create, enlarge, or extend an establishment with adult activity and/or adult material as defined in ZR 12-10 "adult establishment" or related sign at the subject premises.

Internal Use Only

Pre-Filer Name: _____ Date: _____
Pre-Filer Signature: _____
Cost Estimate (if different from applicant): \$ _____
Amount due: \$ _____

Owner type: ☐ Condo/Co-Op } 25A ☐ Partnership ☐ HHC ☐ NYCHA
☐ Corporation ☐ DCAS ☐ HPD ☐ NYS
☒ Individual ☐ DOE ☐ Other Government

Is the owner a non-profit organization? ☐ Yes ☒ No

Name (please print): YISROEL DAVID

Relationship to Owner: SELF

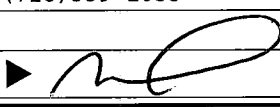
Business Name/Agency: NA

Street Address: 1470 EAST 4 STREET

City: BROOKLYN State: NY Zip: 11230

Telephone Number: (718) 339-1053 Fax: _____

E-Mail Address: _____

Signature and Date ► 

25A Condo/Co-Op or Corporation Second Officer

Name (please print): _____

Title: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ Fax: _____

E-Mail Address: _____

25B 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: _____

E-Mail Address: _____

DOB Reference Number: T00000055644

User Ref ID: 07029